

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F07000003812

FILED
Oct 27, 2008
Secretary of State

Entity Name: HOOP MOUNTAIN FRANCHISE INC.

Current Principal Place of Business:

100L CUMMINGS CENTER #423G
BEVERLY, MA 01915

New Principal Place of Business:

Current Mailing Address:

PO BOX 7068
BEVERLY, MA 01915

New Mailing Address:

FEI Number: 04-3562420

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALLACE, ERIK
6130 TURNBURY PARK DR #8101
SARASOTA, FL 34243 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ERIK WALLACE

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CVP () Delete
Name: GIBBS, STEVEN
Address: 2 OXBOW RD
City-St-Zip: DANVERS, MA 01923

Title: VC () Delete
Name: KRISTIF, GREG
Address: 15 CARTER ST
City-St-Zip: CHELSEA, MA 02411

Title: P () Delete
Name: GIBBS, DAN
Address: 2 OXBOW RD
City-St-Zip: DANVERS, MA 01923

Title: S () Delete
Name: GIBBS, DEIRDRE
Address: 2 OXBOW RD
City-St-Zip: DANVERS, MA 01923

Title: T () Delete
Name: GIBBS, TREVOR
Address: 2 OXBOW RD
City-St-Zip: DANVERS, MA 01923

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VC (X) Change () Addition
Name: KRISTOF, GREG
Address: 15 CARTER ST
City-St-Zip: CHELSEA, MA 02411

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEVE GIBBS

MR

10/27/2008

Electronic Signature of Signing Officer or Director

Date