

2013 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F09000004037

FILED
Nov 19, 2013
Secretary of State

Entity Name: THE NATIONAL ELEPHANT CENTER, INC.

Current Principal Place of Business:

14185 101 STREET
FELLSMERE, FL 32948

New Principal Place of Business:

16290 FELLSMERE GRADE RD.
FELLSMERE, FL 32948

Current Mailing Address:

14185 101 STREET
FELLSMERE, FL 32948

New Mailing Address:

PO. BOX 892
FELLSMERE, FL 32948

FEI Number: 20-5860576

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: JEFF BOLLING

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: C
Name: LEHNHARDT, JOHN
Address: PO. BOX 892
City-St-Zip: FELLSMERE, FL 32048

Title: D
Name: SMITH, KIM
Address: 4001 SW CANYON RD.
City-St-Zip: PORTLAND, OR 97221

Title: D
Name: BAKER, ANNE
Address: P. O. BOX 140130
City-St-Zip: TOLEDO, OH 43614

Title: D
Name: BOLLING, JEFFREY A
Address: 14185
City-St-Zip: FELLSMERE, FL 32948

Title: S
Name: BLAKELY, MIKE
Address: ONE JONESBORO DR.
City-St-Zip: LITTLE ROCK, AR 72205

Title: T
Name: PATE, DENNIS
Address: 3701 S. 10TH ST.
City-St-Zip: OMAHA, NE 68107

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JEFF BOLLING

COO

11/19/2013

Electronic Signature of Signing Officer or Director

Date