

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# H91063

FILED
Sep 30, 2009
Secretary of State

Entity Name: HOPPY'S MARINE AND SPORTS CENTER, INC.

Current Principal Place of Business:

31499 US HWY 27
HAINES CITY, FL 33844

New Principal Place of Business:

Current Mailing Address:

31499 US HWY 27
HAINES CITY, FL 33844

New Mailing Address:

FEI Number: 59-2630379

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

INGRAM, HOBSON D., JR.
31499 US HWY 27
HAINES CITY, FL 33844 US

Name and Address of New Registered Agent:

INGRAM, MICHAEL D.
31499 US HWY 27
HAINES CITY, FL 33844 US

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: MICHAEL D. INGRAM

09/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: INGRAM, DON
Address: 31499 US HWY 27
City-St-Zip: HAINES CITY, FL 33844

Title: VP () Delete
Name: INGRAM, MICHAEL D
Address: 31499 US HWY 27
City-St-Zip: HAINES CITY, FL 33844

Title: VP () Delete
Name: INGRAM, CHRISTOPHER D
Address: HIGHWAY 17-92 WEST
City-St-Zip: HAINES CITY, FL 33844

Title: ST () Delete
Name: INGRAM, HOBSON D JR
Address: HIGHWAY 17-92 WEST
City-St-Zip: HAINES CITY, FL 33844

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: INGRAM, HOBSON D JR.
Address: 31499 US HWY 27
City-St-Zip: HAINES CITY, FL 33844

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: MICHAEL D. INGRAM

VP

09/30/2009

Electronic Signature of Signing Officer or Director

Date