2009 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 26, 2009
Secretary of State

DOCUMENT# M44205

Entity Name: REEF TOURS, INC.

Current Principal Place of Business:

251 MARGARET ST.
KEY WEST, FL 33040 US

New Principal Place of Business:

Current Mailing Address:

251 MARGARET ST.
KEY WEST, FL 33040 US

New Mailing Address:

PO BOX 834
NORTH EASTHAM, MA 02651

FEI Number: 59-2756833 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MILLS, PAUL S CPA
1541 5TH STREET
KEY WEST, FL 33040 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: CARL AVOLA

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: P ( ) Delete
Name: AVOLA, CARL
Address: P.O. BOX 5153
City-St-Zip: KEY WEST, FL 33045

Title: VP ( ) Delete
Name: DAY, JACK
Address: 22987 LONG BEN KEY
City-St-Zip: CUDJOE KEY, FL 33042

Title: S ( ) Delete
Name: DAY, SHARON
Address: 22987 LONG BEN KEY
City-St-Zip: OUDJOE KEY, FL 33042

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: AVOLA, CARL
Address: P.O. BOX 834
City-St-Zip: NORTH EASTHAM, MA 02651

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: CARL AVOLA PRES 10/26/2009

Electronic Signature of Signing Officer or Director Date