2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N0000001959

FILED Mar 26, 2008 Secretary of State

Entity Name: METRO SEMINOLE FOOTBALL CHARITIES, INC.

Current Principal Place of Business:		New Principal Place of Business:	
6310 LIDO ORLANDO	CT.), FL 32807	18743 SABAL ST ORLANDO, FL 32833	3
Current M	ailing Address:	New Mailing Addres	s:
310 LIDO ORLANDO	CT. D, FL 32807	18743 SABAL ST ORLANDO, FL 32833	3
n accordan	ce with s. 607.193(2)(b), F.S., the corporation did not receive	-	Certificate of Status Desired ()
vame and	Address of Current Registered Agent:	Name and Address of	of New Registered Agent:
PILLA, MA 5310 LIDO DRLANDO		BROWN, KEVIN 18743 SABAL ST ORLANDO, FL 32833	3 US
	named entity submits this statement for the purpose of Florida.	of changing its registere	d office or registered agent, or both,
SIGNATUR	RE: KEVIN S. BROWN		03/26/2008
	Electronic Signature of Registered Agent		Date
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Fitle: Name: Address: City-St-Zip:	PRES () Delete BROWN, KEVIN 18743 SABAL ST ORLANDO, FL 32833	Title: Name: Address: City-St-Zip:	() Change () Addition
Fitle: Name: Address: City-St-Zip:	VP () Delete BAUMANN, KURT 12131 WOODGLEN CR CLERMONT, FL 34711	Title: Name: Address: City-St-Zip:	() Change () Addition
Fitle: Name: Address: City-St-Zip:	SEC () Delete PILLA, MARK 6310 LIDO CT ORLANDO, FL 32807	Title: Name: Address: City-St-Zip:	() Change () Addition
Fitle: Name: Address: City-St-Zip:	DIR () Delete KONG, JUSTIN 6238 MORNING MIST LN ORLANDO, FL 32819	Title: Name: Address: City-St-Zip:	() Change () Addition
Fitle: Name: Address: City-St-Zip:	DIR () Delete CINTRON, MANUEL 1725 CORNERVIEW LN ORLANDO, FL 32820	Title: Name: Address: City-St-Zip:	() Change () Addition
Fitle: Name: Address: City-St-Zip:	DIR () Delete GARNER, TOM 450 SYCAMORE SPRINGS ST DEBARY, FL 32713	Title: Name: Address: City-St-Zip:	() Change () Addition

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

SIGNATURE: KEVIN S. BROWN PRES 03/26/2008