2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N01000000702

Entity Name: RESPECT FOR LAW OPTIMIST CLUB, INC.

FILED Mar 15, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

TIM KURKIMILLIS C/O FMY POLICE TIM KURKIMILIS 2210 PECK ST PO BOX 2966

FORT MYERS, FL 33901 FORT MYERS, FL 33901

Current Mailing Address: New Mailing Address:

4632 VINCENNES BLVD PO BOX 2966

FORT MYERS, FL 33902 CAPE CORAL, FL 33901

FEI Number: 65-1013024 FEI Number Applied For () FEI Number Not Applicable ()

Certificate of Status Desired ()

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

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MATTINGLY, BILL KURKIMILIS, TIMOTHY E

4632 VINCENNES BLVD. PO BOX 2966

FORT MYERS, FL 33902 US SUITE 101 CAPE CORAL, FL 33904 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: TIMOTHY E KURKIMILIS 03/15/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition Name: Name:

KURKIMILIS, TIM KURKIMILIS, TIM 2210 PECK ST. Address: PO BOX 2966 Address: City-St-Zip: FT. MYERS, FL 33901 City-St-Zip: FT. MYERS, FL 33902

Title: 1VPT Title: 1VPT (X) Change () Addition () Delete Name: LANE, MARLIN Name: LANE, MARLIN

Address: 2210 PECK STREET Address: PO BOX 2966 City-St-Zip: FORT MYERS, FL 33901 City-St-Zip: FORT MYERS, FL 33902

Title: () Delete Title: SD (X) Change () Addition

LEWIS, LISA Name: LEWIS, LISA Name: PO BOX 2966 Address: 2210 PECK STREET Address:

City-St-Zip: FORT MYERS, FL 33901 City-St-Zip: FORT MYERS, FL 33902

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: TIMOTHY E KURKIMILIS **PRES** 03/15/2005