2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N01000001012

Current Principal Place of Business:

Name and Address of Current Registered Agent:

() Delete

SIGNATURE: DONALD T. SWINARSKI

FOUNTAIN, DAVID

SIGNATURE: DONALD T. SWINARSKI

OFFICERS AND DIRECTORS:

US

7660 NEMEC DR. SO.

7660 NEMEC DR. SO

FEI Number: 65-1086219

FOUNTAIN, DAVID

7660 NEMEC DR. SO. W. PALM BCH, FL 33406

in the State of Florida.

Name:

W. PALM BCH, FL 33406

Current Mailing Address:

W. PALM BCH, FL 33406

FILED Sep 04, 2007 Secretary of State

Certificate of Status Desired ()

09/04/2007

09/04/2007

Date

Date

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition

New Principal Place of Business:

Name and Address of New Registered Agent:

2311 10TH AVE N

2311 10TH AVE N

LAKE WORTH, FL 33461

LAKE WORTH, FL 33461

SWINARSKI, DONALD T 2311 10TH AVE N

LAKE WORTH, FL 33461 US

DECKERT, TIM

New Mailing Address:

SUITE 3

SUITE 3

SUITE 3

Name:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both,

FEI Number Not Applicable ()

Entity Name: THE GREATER LAKE CLARKE SHORES BUSINESS REFERRAL GROUP, INC.

FEI Number Applied For ()

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

Electronic Signature of Registered Agent

above, or on an attachment with an address, with all other like empowered.

Electronic Signature of Signing Officer or Director

7660 NEMEC DR. SO. Address: 1850 FOREST HILL BLVD Address: City-St-Zip: W. PALM BCH, FL 33406 City-St-Zip: W. PALM BCH, FL 33406 Title: () Delete Title: () Change () Addition PARKINSON, MARGARET H Name: Name: Address: 1801 FOREST HILL BLVD. Address: City-St-Zip: W. PALM BCH, FL 33406 City-St-Zip: Title: () Delete Title: (X) Change () Addition SWINARSKI, CHIP Name: SWINARSKI, DONALD T Name: 2311 10TH AVE.NO., SUITE 3 2311 10TH AVE.NO., SUITE 3 Address: Address: City-St-Zip: LAKE WORTH, FL 33461 City-St-Zip: LAKE WORTH, FL 33461 Title: () Delete Title: () Change () Addition LANDON, CAROLYN Name: Name: Address: 7561 NEMEC DR. NO. Address: City-St-Zip: W. PALM BCH, FL 33406 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 617, Florida Statutes; and that my name appears

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