

2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N01000002098

FILED
Oct 09, 2007
Secretary of State

Entity Name: SOUTHWEST FLORIDA OUTDOORSMAN'S ASSOCIATION, INC.

Current Principal Place of Business:

3722 WOODHOLM DR.
PUNTA GORDA, FL 33982

New Principal Place of Business:

29380 PINE VILLA CIRCLE
PUNTA GORDA, FL 33982

Current Mailing Address:

3722 WOODHOLM DR.
PUNTA GORDA, FL 33982

New Mailing Address:

29380 PINE VILLA CIRCLE
PUNTA GORDA, FL 33982

FEI Number: 65-1094950

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HEEKIN, JOHN C
21202-C2 OLEAN BLVD.
PORT CHARLOTTE, FL 33952 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: JOHN HEEKIN

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ANDREU, ROBERT A
Address: 3722 WOODHOLM DR.
City-St-Zip: PUNTA GORDA, FL 33982

Title: V () Delete
Name: HAMPTON, CHARLES
Address: 1115 NW LIVINGSTON ST.
City-St-Zip: ARCADIA, FL 34266

Title: ST () Delete
Name: ANDREWS, JACQUELYN
Address: 31680 WASHINGTON LOOP RD
City-St-Zip: PUNTA GORDA, FL 33982

Title: D () Delete
Name: POWELL, JAY
Address: 25505 DUNDEE RD.
City-St-Zip: PUNTA GORDA, FL 33950

Title: D () Delete
Name: FORD, SCOTT
Address: 3321 AMES ST
City-St-Zip: PUNTA GORDA, FL 33950

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ANDREU, ROBERT A
Address: 29380 PINE VILLA CIRCLE
City-St-Zip: PUNTA GORDA, FL 33982

Title: V (X) Change () Addition
Name: EDWARDS, ROBERT
Address: 35910 WASHINGTON LOOP RD
City-St-Zip: PUNTA GORDA, FL 33982

Title: S (X) Change () Addition
Name: DORAN, JOE
Address: 145 DATE ST
City-St-Zip: PORT CHARLOTTE, FL 33980

Title: T (X) Change () Addition
Name: MONROE, JOE
Address: 1020 GRANT ST.
City-St-Zip: ENGLEWOOD, FL 34224

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

SIGNATURE: ROBERT ANDREU

PRES

10/09/2007

Electronic Signature of Signing Officer or Director

Date