

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N01000004214

FILED
Feb 10, 2005
Secretary of State

Entity Name: SOUTH FLORIDA JUNIOR GOLF FOUNDATION, INC.

Current Principal Place of Business:

9200 WEST BROWARD BLVD.
PLANTATION, FL 33324 US

New Principal Place of Business:

Current Mailing Address:

9200 WEST BROWARD BLVD.
PLANTATION, FL 33324 US

New Mailing Address:

FEI Number: 65-1112689 **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:

VOGEL, JOSEPH
9050 PINES BLVD STE 450-1
PEMBROKE PINES, FL 33024 US

Name and Address of New Registered Agent:

VOGEL, JOSEPH
150 SOUTH UNIVERSITY DRIVE
SUITE C
PLANTATION, FL 33324 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: JOSEPH VOGEL

02/10/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: VOGEL, JOSEPH
Address: 9200 WEST BROWARD BLVD.
City-St-Zip: PLANTATION, FL 33324

Title: T () Delete
Name: VOGEL, JAMIE
Address: 9200 WEST BROWARD BLVD.
City-St-Zip: PLANTATION, FL 33324

Title: T () Delete
Name: OWENS, BOB
Address: 9200 WEST BROWARD STREET
City-St-Zip: PLANTATION, FL 33324

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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: JOSEPH VOGEL

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02/10/2005

Electronic Signature of Signing Officer or Director

Date