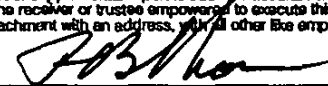


2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED

05 JUL 20 PM 12:41

SECRET
TALLAHASSEE, FLORIDA

DOCUMENT # N01000004328			
1. Entity Name FLORIDA LOCAL GOVERNMENT INTERNET CONSORTIUM, INC.			
Principal Place of Business 3544 MACLAY BLVD. TALLAHASSEE, FL 32312		Mailing Address 3544 MACLAY BLVD. TALLAHASSEE, FL 32312	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 01-0674739		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MCDONALD, ROBERT R 101 E. COLLEGE AVE. TALLAHASSEE, FL 32301		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____			
FILE NOW!!! FEE IS \$297.50		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SUMMERFORD, W. DALE ☒ Delete PO BOX 817 QUINCY, FL 323530817	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Ford-Coates, Barbara ☐ Change ☒ Addition 101 South Washington Boulevard Sarasota, FL 34236-6993
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HUGHES, CHRIS ☐ Delete 151-C NORTH EGLIN PKWY. FORT WALTON BEACH, FL 32548	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition 800058542478 08/15/05--01004--001 **297.50
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TEDDER, JOE G ☐ Delete PO BOX 1189 BARTOW, FL 33831	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CASON, P. DEWITT ☐ Delete PO DRAWER 2069 LAKE CITY, FL 320562069	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NORMAN, RAY ☐ Delete 945 N. TEMPLE AVE. STARKE, FL 32091	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SHORE, R.B. ☐ Delete PO BOX 25400 BRADENTON, FL 34206	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Chairman ☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE:  R.B. Shore		7/19/05 941-719-1800	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	