

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N01000006924

FILED
Nov 20, 2006
Secretary of State

Entity Name: 3D T.E. A. M. FOUNDATION, INC.

Current Principal Place of Business:

ONE SOUTH ORANGE AVE
SUITE 304
ORLANDO, FL 32801

New Principal Place of Business:

Current Mailing Address:

ONE SOUTH ORANGE AVE
SUITE 304
ORLANDO, FL 32801

New Mailing Address:

FEI Number: 31-1807746 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

HOLLYFIELD, RONALD C PD
1850 HARLEY PL
MERRITT ISLAND, FL 32952 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: RONALD HOLLYFIELD

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HOLLYFIELD, RONALD C
Address: 1850 HARLEY PL
City-St-Zip: MERRITT ISLAND, FL 32954

Title: VP (X) Delete
Name: CHASE, CINDY
Address: 1850 HARLEY PL
City-St-Zip: MERRITT ISLAND, FL 32954

Title: DIR () Delete
Name: ARCHER, MICHAEL
Address: 592 HARRISON ST
City-St-Zip: PALM BAY, FL 32905

Title: DIR () Delete
Name: HOLLYFIELD, ANN
Address: 756 CORONA
City-St-Zip: PALM BAY, FL 32907

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:

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 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: RONALD HOLLYFIELD

PD

11/20/2006

Electronic Signature of Signing Officer or Director

Date