2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N01000006924

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

FILED Jan 18, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

ONE SOUTH ORANGE AVE 189 SOUTH ORNAGE AVE

SUITE 304 1800

ORLANDO, FL 32801 ORLANDO, FL 32801

Current Mailing Address: New Mailing Address:

ONE SOUTH ORANGE AVE 189 SOUTH ORANGE AVE

SUITE 304 1800 ORLANDO, FL 32801 ORLANDO, FL 32801

RLANDO, FL 32801 ORLANDO, FL 3280

FEI Number: 31-1807746 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: Name and Address of New Registered Agent:

HOLLYFIELD, RONALD C PD

1850 HARLEY PL

MERRITT ISLAND, FL 32952 US

HOLLYFIELD, RONALD C PD

711 BALLON TER SE

PALM BAY, FL 32909 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 01/18/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: HOLLYFIELD, RONALD C Name: HOLLYFIELD, RONALD C Address: 1850 HARLEY PL Address: 711 BALLON TER SE

Address: 1830 HARLEY PL Address: 711 BALLON TER SE

City-St-Zip: MERRITT ISLAND, FL 32954 City-St-Zip: PALM BAY, FL 329801

Title: DIR () Delete Title: DIR (X) Change () Addition Name: ARCHER, MICHAEL Name: BROWN, SHERRI

 Address:
 592 HARRISON ST
 Address:
 1709 LA MADERIA DR

 City-St-Zip:
 PALM BAY, FL 32905
 City-St-Zip:
 PALM BAY, FL 32908

Title: DIR () Delete Title: () Change () Addition

 Name:
 HOLLYFIELD, ANN
 Name:

 Address:
 756 CORONA
 Address:

 City-St-Zip:
 PALM BAY, FL 32907
 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: RONALD C HOLLYFIELD PD 01/18/2008

Electronic Signature of Signing Officer or Director

Date