2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N01321

FILED Jan 30, 2008 Secretary of State

Entity Name: FLORIDA RETIRED EDUCATORS FOUNDATION, INCORPORATED

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

10051 1ST ST. N 10051 5TH ST. N STE 108 STE 108

SAINT PETERSBURG, FL 337022211 US SAINT PETERSBURG, FL 337022211 US

Current Mailing Address: New Mailing Address:

10051 1ST. ST. N. 10051 5TH ST. N

STE 108 STE 108

SÄINT PETERSBURG, FL 337022211 US SÄINT PETERSBURG, FL 337022211 US

FEI Number: 59-2439336 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:

MORGAN, MERLE H BARNES, HORTON 10051 1ST ST. N. 10051 5TH ST. N.

STE #108 STE #108 SAINT PETERSBURG, FL 337022211 US SAINT PETERSBURG, FL 337022211 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: HORTON BARNES 01/30/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: CD () Delete Title: CD (X) Change () Addition

 Name:
 MORGAN, MERLE H
 Name:
 JAMES, ELLEN L

 Address:
 4651 - 1ST ST NE #311
 Address:
 515 MANDALAY RD

City-St-Zip: ST PETERSBURG, FL 337034943 City-St-Zip: ORLANDO, FL 328093106 US

Title: SD () Delete Title: SD (X) Change () Addition

Name: WHITE, LETTIE D . Name: PHILLIP, GERMAINE J Address: 420 HOLLY ST. Address: 4401 NW 19TH AVE

City-St-Zip: MONTICELLO, FL 32344 City-St-Zip: GAINESVILLE, FL 326053474 US

Title: TD () Delete Title: TD (X) Change () Addition

 Name:
 MORGAN, MERLE H
 Name:
 BARNES, HORTON

 Address:
 4651 1ST ST. NE #311
 Address:
 8480 CR 647S

City-St-Zip: SAINT PETERSBURG, FL 337034943 City-St-Zip: BUSHNELL, FL 335137426 US

Title: CD () Delete Title: VCD (X) Change () Addition

Name: KERR, MARILYN M Name: BOYCE, BETTY WRAY
Address: 3949 MINUELO CIRCLE N Address: 37448 BLACKBERRY CT

City-St-Zip: JACKSONVILLE, FL 322173651 City-St-Zip: ZEPHYRHILLS, FL 335425241 US

Title: VCD (X) Delete Title: () Change () Addition

 Name:
 OVERTON, LOLA M
 Name:

 Address:
 1451 13TH AVENUE N.
 Address:

 City-St-Zip:
 NAPLES, FL 341023467
 City-St-Zip:

Title: CD (X) Delete Title: () Change () Addition

 Name:
 MORGAN, MERLE H
 Name:

 Address:
 4651 1ST STREET NE #311
 Address:

 City-St-Zip:
 ST. PETERSBURG, FL 33704943
 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: HORTON BARNES TD 01/30/2008