

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N02000000049

FILED
Nov 19, 2008
Secretary of State

Entity Name: OLYMPIA HIGH SCHOOL FOOTBALL BOOSTERS, INC.

Current Principal Place of Business:

ATTN: JAMES G. WILLARD
300 S. ORANGE AVE., STE. 1000
ORLANDO, FL 328013373

New Principal Place of Business:

ATTN: JOE ALARIE
260 EAST PLANT STREET
WINTER GARDEN, FL 34787

Current Mailing Address:

ATTN: JAMES G. WILLARD
300 S. ORANGE AVE., STE. 1000
ORLANDO, FL 328013373

New Mailing Address:

ATTN: JOE ALARIE
260 EAST PLANT STREET
WINTER GARDEN, FL 34787

FEI Number: 04-3590901 **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:

CORPORATION COMPANY OF ORLANDO
300 S. ORANGE AVE.
SUITE 1000 (JGW)
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

ALARIE DESIGN ASSOCIATES, INC
260 EAST PLANT STREET
WINTER GARDEN, FL 34787 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 ALARIE

11/19/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WILLARD, JAMES G
Address: 300 S. ORANGE AVE. STE. 1000
City-St-Zip: ORLANDO, FL 32801

Title: VD () Delete
Name: HEAD, ROBERT
Address: 4301 S. APOPKA VINELAND ROAD
City-St-Zip: ORLANDO, FL 32835

Title: SD (X) Delete
Name: WIEDERKEHR, KATHY
Address: 4301 S. APOPKA VINELAND ROAD
City-St-Zip: ORLANDO, FL 32835

Title: VD () Delete
Name: ALARIE, JOSEPH
Address: 260 EAST PLANT STREET
City-St-Zip: WINTER GARDEN, FL 34787

Title: TD (X) Delete
Name: HOULIHAN, MAUREEN
Address: 4301 S. APOPKA VINELAND ROAD
City-St-Zip: ORLANDO, FL 32835

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ALARIE, JOSPEH
Address: 260 EAST PLANT STREET
City-St-Zip: WINTER GARDEN, FL 34787

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 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: JOSEPH ALARIE

PD

11/19/2008

Electronic Signature of Signing Officer or Director

Date