

# 2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N02000003350

FILED  
Nov 03, 2008  
Secretary of State

**Entity Name:** NAPLES TOUCHDOWN CLUB, INC.

**Current Principal Place of Business:**

6506 AUTUMN WOODS BOULEVARD  
NAPLES, FL 34109

**New Principal Place of Business:**

**Current Mailing Address:**

2467 PINWOOD CIRCLE  
NAPLES, FL 34105

**New Mailing Address:**

2400 TAMIAMI TRAIL NORTH  
SUITE 201  
NAPLES, FL 34103

FEI Number: 01-0732772      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:**

COLEMAN, KEVIN G ESQ.  
4001 TAMIAMI TRAIL NORTH  
SUITE 300  
NAPLES, FL 34103 US

**Name and Address of New Registered Agent:**

DAVIDSON & NICK CPAS  
2400 TAMIAMI TRAIL NORTH  
SUITE 201  
NAPLES, FL 34103 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: PAUL C NICK

11/03/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: DEVOE, MARK  
Address: 2601 AIRPORT RD  
City-St-Zip: NAPLES, FL 34112

Title: TD ( ) Delete  
Name: SALLEY, LYNN  
Address: 1100 GOLDEN EAGLE CIR  
City-St-Zip: NAPLES, FL 34102

Title: SD ( ) Delete  
Name: HANCOCK, TIM  
Address: 6506 AUTUMN WOODS BLVD  
City-St-Zip: NAPLES, FL 34109

**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:

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: PAUL C NICK

CPA

11/03/2008

Electronic Signature of Signing Officer or Director

Date