

# **2010 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N02000004625

**FILED**  
**Feb 02, 2010**  
**Secretary of State**

**Entity Name:** SAWMILL CHARITIES INC

**Current Principal Place of Business:**

21710 US HWY 98  
DADE CITY, FL 33523 US

**New Principal Place of Business:**

**Current Mailing Address:**

21710 US HWY 98  
DADE CITY, FL 33523 US

**New Mailing Address:**

**FEI Number:** 02-0613550      **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:**

CORPORATE CREATIONS NETWORK INC.  
11380 PROSPERITY FARMS ROAD #221E  
PALM BEACH GARDENS, FL 33410 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:** JP PERKINS

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** D  
**Name:** SHOURDS, RICHARD D  
**Address:** 21710 US HWY 98  
**City-St-Zip:** DADE CITY, FL 33523

**Title:** D  
**Name:** PARK, WILLIAM C  
**Address:** 21710 US HWY 98  
**City-St-Zip:** DADE CITY, FL 33523

**Title:** D  
**Name:** DANIEL, KEVIN J  
**Address:** 21710 US HWY 98  
**City-St-Zip:** DADE CITY, FL 33523

I hereby 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 all other like empowered.

**SIGNATURE:** RICHARD SHOURDS

D

02/02/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date