2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N02000004986

FILED Apr 14, 2005 Secretary of State

Entity Name: FLORIDA SPORTSMEN CONSERVATION ASSOCIATION, INC.

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

17685 VALENCIA BLVD LOXAHATCHEE, FL 33470

Current Mailing Address: New Mailing Address:

17685 VALENCIA BLVD LOXAHATCHEE, FL 33470

FEI Number: 65-0515685 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:

POWELL, R. MURRAY 17685 VALENCIA BLVD LOXAHATCHEE, FL 33470 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: R. MURRAY POWELL

LOXAHATCHEE, FL 33470

Electronic Signature of Registered Agent Date

City-St-Zip:

OFFICERS AND DIRECTORS:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

tle: PD () Delete Title: PD (X) Change () Addition

 Name:
 HICKMAN, PAUL
 Name:
 WRIGHT JR., BISHOP

 Address:
 15360 118TH TERRACE NO.
 Address:
 15439 94TH. STREET N.

 City-St-Zip:
 JUPITER, FL 33478
 City-St-Zip:
 WEST PALM BEACH, FL 33412

Title: VPD () Delete Title: VPD (X) Change () Addition Name: MAHARREY, BYRON Name: WHITE, DENNIS

Address: 329 EMERSON CIRCLE Address: 1959 VIOLET AVENUE
City-St-Zip: PALM SPRINGS, FL 33461 City-St-Zip: WEST PALM BEACH, FL 33415

Title: SD () Delete Title: SD (X) Change () Addition Name: SHARP, SHARI Name: SHARP, SHARI

Address: 4300 127TH TRAIL Address: 4300 127TH TRAIL N.

City-St-Zip: ROYAL PALM BEACH, FL 33411 City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: TD () Delete Title: () Change () Addition Name: POWELL, MURRAY Name: Address: 17685 VALENCIA BLVD Address:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: R. MURRAY POWELL TD 04/14/2005