

2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N02000006939

FILED
Oct 09, 2007
Secretary of State

Entity Name: MUDDY WATERS ATV ASSOCIATION, INC.

Current Principal Place of Business:

601 MURRAY ST.
OSTEEN, FL 32764

New Principal Place of Business:

2315 HYACINTH RD.
DELAND, FL 32724

Current Mailing Address:

PO BOX 841
OSTEEN, FL 32764

New Mailing Address:

2315 HYACINTH RD.
DELAND, FL 32724

FEI Number: 27-0029462 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:

JOHNSON, BARNEY L
1022 ANGORA ST.
DELTONA, FL 32725 US

Name and Address of New Registered Agent:

JOHNSON, BARNEY L II
2315 HYACINTH RD.
DELAND, FL 32724 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: BARNEY L. JOHNSON II

10/09/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: JOHNSON, BARNEY L
Address: 601 MURRAY ST.
City-St-Zip: OSTEEN, FL 32764

Title: VP () Delete
Name: MANNOR, MARK
Address: 708 TEMPLE WAY
City-St-Zip: WINTER SPRINGS, FL 32708

Title: S () Delete
Name: MANNOR, JAMIE
Address: 708 TEMPLE WAY
City-St-Zip: WINTER SPRINGS, FL 32708

Title: TD () Delete
Name: JOHNSON, ROBYN L
Address: 601 MURRAY ST.
City-St-Zip: OSTEEN, FL 32764

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: JOHNSON, BARNEY L
Address: 2315 HYACINTH RD.
City-St-Zip: DELAND, FL 32724

Title: VP (X) Change () Addition
Name: KERR, AARON
Address: 3554 ELLIS LN.
City-St-Zip: MIMS, FL 32754

Title: S (X) Change () Addition
Name: KRISTEFF, MARY
Address: 699 PIEDMONT DR.
City-St-Zip: DELTONA, FL 32725

Title: TD (X) Change () Addition
Name: JOHNSON, ROBYN L
Address: 2315 HYACINTH RD.
City-St-Zip: DELAND, FL 32724

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: ROBYN L JOHNSON

TD

10/09/2007

Electronic Signature of Signing Officer or Director

Date