

2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N02000007002

FILED
Nov 17, 2004
Secretary of State**Entity Name:** REDNECK INVITATIONAL FISHING TOURNAMENT, INC.**Current Principal Place of Business:**787 OVERRIVER DRIVE
NORTH MYERS, FL 33903**New Principal Place of Business:****Current Mailing Address:**787 OVERRIVER DRIVE
NORTH MYERS, FL 33903**New Mailing Address:****FEI Number:** 33-1021867 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
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:**MURRAY, ROBERT
787 OVERRIVER DRIVE
NORTH MYERS, FL 33903 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** DP () Delete
Name: WHITE, MARK
Address: 1105 SR 82
City-St-Zip: IMMOKOLEE, FL 34142**Title:** DV () Delete
Name: MURRAY, ROBERT
Address: 787 OVERRIVER DR
City-St-Zip: NORTH FT MYERS, FL 33903**Title:** DV () Delete
Name: KIRSCHNER, TOM
Address: 6533 IDLEWILD ST
City-St-Zip: FORT MYERS, FL 33912**Title:** DT () Delete
Name: FRISBIE, MARK
Address: 6451 MOGAN LALEE LANE
City-St-Zip: FORT MYERSS, FL 33912**Title:** DS () Delete
Name: MATHIS, WES
Address: PO BOX 2776
City-St-Zip: LABELLE, FL 33975**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:**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 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: ROBERT MURRAY

DV

11/17/2004

Electronic Signature of Signing Officer or Director

Date