2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N03000000635

FILED Oct 16, 2009 Secretary of State

Entity Name: CLEARWATER HEATWAVE BASKETBALL, INC.

| urrent P | rincipal Place of Business: | New Principal Place of Business: |
|--|---|--|
| 132 WYA LEARWA | ATT ST. ATER, FL 33756 US | |
| urrent N | lailing Address: | New Mailing Address: |
| 132 WYA LEARWA | ATT ST. ATER, FL 33756 US | |
| accordan | : 91-2188227 FEI Number Applied For() ce with s. 607.193(2)(b), F.S., the corporation did no I Address of Current Registered Agent: | FEI Number Not Applicable () Certificate of Status Desired () not receive the prior notice. Name and Address of New Registered Agent: |
| 6402 U.S | BRUCE R I. HWY. 19 NORTH RBOR, FL 34684 US | |
| he above the State | named entity submits this statement for the $\mbox{\scriptsize I}$ e of Florida. | purpose of changing its registered office or registered agent, or both |
| IGNATUI | RE: CHRISTOPHER HALL | |
| | Electronic Signature of Registered Ag | gent Date |
| FFICER | S AND DIRECTORS: | ADDITIONS/CHANGES TO OFFICERS AND DIRECTO |
| tle: ame: ddress: ity-St-Zip: | PRES () Delete HALL, CHRISTOPHER R 1132 WYATT ST. CLEARWATER, FL 33756 US | Title: () Change () Addition Name: Address: City-St-Zip: |
| tle: ame: ddress: ity-St-Zip: | V.P. () Delete DUBLIN, DARIAN 1896 PARADISE LANE CLEARWATER, FL 33756 US | Title: () Change () Addition Name: Address: City-St-Zip: |
| tle: ame: | TRES () Delete GOSS, MELANIE 1546 GREENLEA DRIVE CLEARWATER, FL 33755 US | Title: () Change () Addition Name: Address: City-St-Zip: |
| ldress: ty-St-Zip: | | |
| ty-St-Zip: lle: ame: ldress: | SEC. () Delete HAMM, CHLOE 904 PENNSYVANIA AVE. CLEADMATER EL 33755 LIS | Title: DIR (X) Change () Addition Name: DEVINS, JAMES Address: P.O. BOX 5285 City St. Zin: CLEARWATER EL 33759-539 US |
| ty-St-Zip: :le: ame: | HAMM, CHLÒÉ | Name: DEVINS, JAMES |

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: CHRISTOPHER HALL PRES 10/16/2009