2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N03000000851

Entity Name: FYD CARROLLWOOD HURRICANES, INC.

FILED Oct 10, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 13112 N. FLORIDA AVE. 3022 LAKE ELLEN DR. TAMPA, FL 33612 TAMPA, FL 33618 **Current Mailing Address: New Mailing Address:** 13112 N. FLORIDA AVE. 3022 LAKE ELLEN DR. TAMPA, FL 33612 TAMPA, FL 33618 FEI Number: 02-0655930 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MADRAZO, VICTOR T 3022 LAKE ELLEN DR. TAMPA, FL 33618 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: VICTOR T. MADRAZO Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete GRIFFEY, BOB Name: Name: 12533 ST. CHARLOTTE DR. Address: Address: City-St-Zip: TAMPA, FL 33618 City-St-Zip: Title: () Delete Title: (X) Change () Addition MICHAEL, ROSSI Name: BOYD, HIPPENSTIEL Name: Address: 4011 HUDSON TERRACE Address: 18144 OAKDALE RD. City-St-Zip: TAMPA, FL 33618 City-St-Zip: ODESSA, FL 33556 Title: () Delete Title: () Change () Addition MADRAZO, TOM Name: Name: Address: 3022 LAKE ELLEN DR. Address: City-St-Zip: TAMPA, FL 33618 City-St-Zip: Title: FCD () Delete Title: () Change () Addition Name: MITCHELL, TERRY Name: Address: 5715 RIDGESTONE DR Address: City-St-Zip: TAMPA, FL 33625 City-St-Zip: Title: CCD () Delete Title: CHR (X) Change () Addition FARRELL, SUE Name: Name: PULLIAM, SANDRA 9802 BENNINGTON DR 10360 LIGHTNER BRIDGE DR. Address: Address: City-St-Zip: TAMPA, FL 33626 City-St-Zip: **TAMPA, FL 33626** Title: () Delete Title: () Change () Addition DUNN, MELANIE Name: Name: Address: 15714 ROCKY LEDGE DR Address: **TAMPA, FL 33625** City-St-Zip: 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: TOM MADRAZO TD 10/10/2005