2011 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N03000010406

FILED Aug 01, 2011 Secretary of State

Entity Name: BAKER COUNTY TOUCHDOWN CLUB, INC.

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

MEMORIAL STADIUM 44 N 1ST ST

1 SHUEY AVE MACCLENNY, FL 32063 MACCLENNY, FL 32063

Current Mailing Address: New Mailing Address:

P O BOX 875

MACCLENNY, FL 32063

FEI Number: 20-0922224 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

THARPE, RICHARD K

GASKINS, ROLAND

44 N 16 T 6 T

756 E SHUEY STREET 44 N 1ST ST

MACCLENNY, FL 32063 US MACCLENNY, FL 32063 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: ROLAND GASKINS 08/01/2011

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: F

Name: GASKINS, ROLAND Address: 44 N 1ST ST

City-St-Zip: MACCLENNY, FL 32063

Title: D

Name: ROBERTS, KENNETH Address: P O BOX 874

City-St-Zip: MACCLENNY, FL 32063

Title: D

Name: FRASER, RYAN

Address: 6311 SOUTHERN STATES NURSERY RD

City-St-Zip: MACCLENNY, FL 32063

Title: D

Name: YARBROUGH, W. BRIAN
Address: 14696 JESSE YARBROUGH RD
City-St-Zip: GLEN ST MARY, FL 32040

Title: ST

Name: LEWIS, HEATHER Address: PO BOX 1467

City-St-Zip: MACCLENNY, FL 32063

I hereby 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 all other like empowered.

SIGNATURE: ROLAND GASKINS P 08/01/2011