

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # N04000007538	
1. Entity Name THE WILLIAM H. AND LEONORA K. HEGAMYER FAMILY FOUNDATION, INC.	



FILED
08 JUN -9 PM 1:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business 511 NORTH MASHTA DRIVE KEY BISCAVNE, FL 33149	Mailing Address 511 NORTH MASHTA DRIVE KEY BISCAVNE, FL 33149
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address c/o Louis Nostro
Suite, Apt. #, etc.	Suite, Apt. #, etc. 201 S. Bisc. Blvd. #1600
City & State	City & State Miami, FL 33131
Zip	Country

06052008 REIN-NR1 161146R2E099 (1/07) 07-09

REINSTATEMENT

4. FEI Number 20-1593749	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent NOSTRO, LOUIS 201 SOUTH BISCAVNE BOULEVARD SUITE 1600 MIAMI, FL 33131	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Louis Nostro 6/6/08
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$297.50	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10																								
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Louis Nostro 6/6/08 (305) 358-6300
Signature and typed or printed name of signing officer or director Date Daytime Phone #

Louis Nostro, attorney-in-fact for William H. Hegamyer, Director