

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # N04000007985

1. Entity Name
SPANISH MOSS PHILANTHROPIES, INC.



APPROVED
AND
FILED

06 NOV -9 PM 4:20

1072

Principal Place of Business
1300 BALL FARM RD
QUINCY, FL 32351

Mailing Address
~~1300 BALL FARM RD~~
~~QUINCY, FL 32351~~

REINSTATEMENT



2. Principal Place of Business

3. Mailing Address

1300 BALL FARM ROAD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

11032006 REIN-NP

CR2E099 (11/05)

City & State

City & State
QUINCY, FL

4. FEI Number
22-3902058

Applied For
Not Applicable

Zip Country

Zip Country

32352

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LEVINE, PAULA
1000 BALL FARM RD
QUINCY, FL 32351

Name Sarah L. McCoy

Street Address (P.O. Box Number Is Not Acceptable)

1300 BALL FARM ROAD

City QUINCY

FL

Zip Code 32352

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

11/4/06

FILE NOW!!! FEE IS \$236.25
After January 1, 2007, Fee will be \$297.50

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☒ Delete
NAME LEVINE, PAUL A
STREET ADDRESS 1300 BALL FARM RD
CITY-ST-ZIP QUINCY, FL 32351

TITLE ☐ Change ☐ Addition
NAME 600081789436
STREET ADDRESS 11/15/06--01015--007
CITY-ST-ZIP **236.25

TITLE D ☐ Delete
NAME MCCOY, SARAH L
STREET ADDRESS 500 DUTCH VALLEY RD #311
CITY-ST-ZIP ATLANTA, GA 30324

TITLE ☒ Change ☐ Addition
NAME Sarah L. McCoy
STREET ADDRESS Executive Director
CITY-ST-ZIP 1300 Ball Farm Road
Quincy, Florida 32352

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Change ☐ Addition
NAME Clint Joiner
STREET ADDRESS 905 Exchange St.
CITY-ST-ZIP Union City, TN 38261

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Change ☐ Addition
NAME Melissa Hudgens
STREET ADDRESS 112 Carolina Avenue
CITY-ST-ZIP Chapel Hill, NC 27514

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/4/06

850-875-3862

Date Daytime Phone #



292

November 6, 2006

Division of Corporations
State of Florida
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

To Whom It May Concern:

I am writing with regard to a notice of dissolution which I recently received (date of issuance: 8.15.06) in the mail at the address below. I regret that I received no written notification prior to this notice of dissolution indicating that the Spanish Moss Foundation entity would be dissolved. As such, I am requesting a waiver of the reinstatement fee.

I thank you for your time, and appreciate your help. I can be reach at the address and phone number below. I can also be reached at sarah@spanishmossproductions.org or on my personal mobile phone at 404-784-5264.

With kind regards,

Sarah L. McCoy
Executive Director