2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000000492

Entity Name: BOCA RATON RUGBY CLUB INC

FILED Feb 07, 2007 Secretary of State

Current Principal Place of Busi	ness: New	Principal Place of Bus	siness:
oarrent i interpar i tace of basi	11000.	i illioipai i lace di Da.	JIII ~ JJ.

22701 CAMINO DEL MAR #45 2633 SE 15 STREET

BOCA RATON, FL 33433 POMPANO BEACH, FL 33062

Current Mailing Address: New Mailing Address:

22701 CAMINO DEL MAR #45 2633 SE 15 STREET

BOCA RATON, FL 33433 POMPANO BEACH, FL 33062

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

RATIGAN, MICHAEL L
22701 CAMINO DEL MAR #45
BURKE, ROBERT L
1029 SE 14 COURT

BOCA RATON, FL 33433 US DEERFIELD BEACH, FL 33441 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: ROBERT BURKE 02/07/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: P () Delete Title: P (X) Change () Addition

 Name:
 TRUEMAN, NIGEL
 Name:
 NELSON, MARK

 Address:
 5947 GLENBROOK DRIVE
 Address:
 2633 SE 15 STREET

 City-St-Zip:
 BOCA RATON, FL 33433
 City-St-Zip:
 POMPANO BEACH, FL 33062

Title: () Delete Title: VP () Change (X) Addition

 Name:
 Name:
 BURKE, ROBERT

 Address:
 Address:
 1029 SE 14 COURT

 City-St-Zip:
 City-St-Zip:
 DEERFIELD BEACH, FL 33441

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERT BURKE VP 02/07/2007