2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

Jackson

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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FILED SECRETARY OF STATE TALLAHASSEE, FLORIDA DOCUMENT # N05000001387 09 MAR -6 AM 8: 05 FORT WHITE SOFTBALL DUGOUT CLUB, INC. Principal Place of Business Mailing Address PO BOX 1014 17828 SW SR 47 FORT WHITE, FL 32038 FORT WHITE, FL 32038 2. Principal Place of Business - No P.O. Box # 3. Mailing Address REINSTATEMENT (%) Suite. Apt. #. etc. Suite, Apt. #, etc. Applied For 4. FEI Number NOT APPLICABLE City & State City & State Not Applicable \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Shawn Jones SPIRES, GEORGE Street Address (P.O. Box Number is Not Acceptable) 272 SW HENDERSON TERR FORT WHITE, FL 32038 398 SW Sanders Wav 32038 Fort White 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 egistered agent 2-24-09 Shawn Jones SIGNATURE ent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) 🗼 Make check payable to 😘 FILE NOW!!! FEE IS \$297.50 Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. Change **K** Delete TITLE TITLE President SPIRES, GEORGE NAME NAME Shawn Jones STREET ADDRESS STREET ADDRESS PO BOX 1014 398 SW Sanders Way, Ft.White,FL32038 FORT WHITE, FL 32038 CITY-ST-ZIP CITY-ST-ZIP TITLE VP TITLE Change . Addition Delete Vice President CONNERS, MICHAEL NAME NAME Marilyn Douglass PO BOX 1014 STREET ADDRESS STREET ADDRESS 510 SW Broderick Dr., Lake City, FL FORT WHITE, FL 32038 CITY-ST-ZIP CITY-ST-ZIP S Delete TITLE Secretary SPIRES, BETH Sandee Williams 1679 SW Jim Witt Rd.,Lake City, FL NAME NAME STREET ADDRESS PO BOX 1014 STREET ADDRESS CITY-ST-ZIP FORT WHITE, FL 32038 CITY-ST-ZIP 32025 TITLE ☐ Change Addition TITLE Delete 100145147061 03/06/09--01027--014 **29 HODSON, LAURIE NAME NAME **297.50 PO BOX 1014 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FORT WHITE, FL 32038 CITY-ST-ZIP TITLE Detete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change ☐ Addition Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

Laurie Hodson

2-24-09

386-758-1007

Davime Phone #