2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Oct 06, 2009
Secretary of State

DOCUMENT# N05000003565

Entity Name: THE RURAL TIER DEFENSE FUND, INC.

Current Principal Place of Business:

528A CLEMATIS STREET
WEST PALM BEACH, FL 33401

New Principal Place of Business:

Current Mailing Address:

528A CLEMATIS STREET
WEST PALM BEACH, FL 33401

New Mailing Address:

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:

STAMBAUGH, REGINALD G P.A.
180 ROYAL PALM WAY
SUITE 201
PALM BEACH, FL 33480 US

Name and Address of New Registered Agent:

CORNING, LAWRENCE .
528 A CLEMATIS ST
WEST PALM BEACH, FL 33401 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: LAWRENCE CORNING 10/06/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete
Name: CORNING, LAWRENCE
Address: 528A CLEMATIS STREET
City-St-Zip: WEST PALM BEACH, FL 33401

Title: VD ( ) Delete
Name: GREENWALD, GARY
Address: 528A CLEMATIS STREET
City-St-Zip: WEST PALM BEACH, FL 33401

Title: SD (X) Delete
Name: STAMBAUGH, REGINALD G
Address: 180 ROYAL PALM WAY, SUITE 201
City-St-Zip: PALM BEACH, FL 33480

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: LAWRENCE CORNING PRES 10/06/2009
Electronic Signature of Signing Officer or Director Date