

# 2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000000021

**FILED**  
**Dec 17, 2008**  
**Secretary of State**

**Entity Name:** B.Y.F.O.R.C.E. INC.

**Current Principal Place of Business:**

630 WEST VIRGINA STREET SUITE 203  
TALLAHASSEE, FL 32303

**New Principal Place of Business:**

8450 GATE PARKWAY WEST  
1505  
JACKSONVILLE, FL 32216

**Current Mailing Address:**

630 WEST VIRGINA STREET SUITE 203  
TALLAHASSEE, FL 32303

**New Mailing Address:**

P.O. BOX 550562  
JACKSONVILLE, FL 322550562

**FEI Number:** 20-4040419

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**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:**

KNIGHT, STEPHEN R.A. ESQ  
1315 E LAFAYETTE STREET  
TALLAHASSEE, FL 32303 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: STEPHEN R.A. KNIGHT

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: LOOPER, ROBERT W  
Address: P.O. BOX 287  
City-St-Zip: PONTE VEDRA BEACH, FL 32004

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

Title: D ( ) Delete  
Name: BURCH, ORLANDO K  
Address: 2536 CENTERVILLE COURT  
City-St-Zip: TALLAHASSEE, FL 32308

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

Title: D (X) Delete  
Name: CARTER, MALCOLM J  
Address: 630 WEST VIRGINA STREET SUITE 203  
City-St-Zip: TALLAHASSEE, FL 32303

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: ROBERT W. LOOPER

D

12/17/2008

Electronic Signature of Signing Officer or Director

Date