2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # N06000000605

1. Entity Name
FLORIDA WEST COAST AUBURN CLUB INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 MAR 24 PM 12:05

Principal Place of Business	Mailing Address
3369 RAMBLEWOOD CT SARASOTA, FL 34237 US	PO BOX 50794 SARASOTA, FL 34232 US

03172009 REIN-NP CR2E099 (1/07)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	PO Box 511 Suite, Apt. #, etc.
City & State	City & State: Cortez, FL
Zip / Country	Zip: 34215-0511 / Country: USA

4. FEI Number: 02-0762864 ☐ Applied For ☐ Not Applicable

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
LAWSON, BENJAMIN M PRES 3369 RAMBLEWOOD CT SARASOTA, FL 34237	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 _____ 70014702669 7 03/24/09--01007--022 **122.50 DATE

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $122.50

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

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LAWSON, BENJAMIN M PRES 3369 RAMBLEWOOD CT SARASOTA, FL 34237	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V/D LAWSON, BENJAMIN M	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BUSKIRK, ADAM V PRES 14248 GNATCATCHER TERRACE BRADENTON, FL 34202	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P/D BUSKIRK, ADAM	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BREGGER, JOHN SECY 325 15TH ST CT W BRADENTON, FL 34205	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	BREGGER, JOHN	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MIAKINKOFF, MICHAEL A TREAS 4508-B 101ST ST W BRADENTON, FL 34210	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T/D MIAKINKOFF, MICHAEL A 2224 12th St W Apt# 1 BRADENTON, FL 34205	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	[illegible]	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S/D SMITH, LOU E 2224 12th St W Apt#1 Bradenton, FL 34205	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DEER, RAY 2939 MARKRIDGE RD SARASOTA, FL 34231	☐ Change ☑ Addition

PD 12-04

PD 3/25/09

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: Michael A Miakinkoff 3/17/2009 941-748-8042

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #