

# 2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000000930

FILED  
Feb 15, 2008  
Secretary of State

Entity Name: HIGH STREET FOUNDATION, INC.

## Current Principal Place of Business:

12802 TAMPA OAKS BOULEVARD  
SUITE 405  
TAMPA, FL 33637

## New Principal Place of Business:

## Current Mailing Address:

12802 TAMPA OAKS BOULEVARD  
SUITE 405  
TAMPA, FL 33637

## New Mailing Address:

PO BOX 16577  
TAMPA, FL 33687

FEI Number: 20-4164204      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
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:

BARTOLETTA, JOHN  
12802 TAMPA OAKS BOULEVARD  
SUITE 405  
TAMPA, FL 33637 US

## Name and Address of New Registered Agent:

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: JPHN BARTOLETTA

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: BARTOLETTA, JOHN  
Address: 12802 TAMPA OAKS BOULEVARD STE 405  
City-St-Zip: TAMPA, FL 33637

Title: D ( ) Delete  
Name: THOMAS, DENNIS  
Address: 8666 SEMINOLE BOULEVARD  
City-St-Zip: SEMINOLE, FL 33772

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: BARTOLETTA, JOHN  
Address: PO BOX 16577  
City-St-Zip: TAMPA, FL 33687

Title: D (X) Change ( ) Addition  
Name: THOMAS, DENNIS  
Address: 8200 - 113TH STREET NORTH, SUITE 104  
City-St-Zip: SEMINOLE, FL 33772

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: JOHN BARTOLETTA

D

02/15/2008

Electronic Signature of Signing Officer or Director

Date