

# 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000002052

FILED  
Jun 08, 2009  
Secretary of State

**Entity Name:** THE JOHNNY GLENN THRIFT AND CONSIGNMENT SHOP, INC.

**Current Principal Place of Business:**

8105 CONDOR ST. , BUILDING 18  
TAMPA, FL 33608

**New Principal Place of Business:**

8105 CONDOR ST. , BUILDING 18  
TAMPA, FL 33608

**Current Mailing Address:**

PO BOX 6248  
TAMPA, FL 33608

**New Mailing Address:**

8105 CONDOR ST. , BUILDING 18  
TAMPA, FL 33608

**FEI Number:** 20-4503130      **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:**

PHILHOWER, SHERI MANAGER  
8105 CONDOR ST. BUILDING 18  
TAMPA, FL 33608 US

**Name and Address of New Registered Agent:**

HOWE, ALICE PRESIDE  
8105 CONDOR ST. BUILDING 18  
TAMPA, FL 33608 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: ALICE A HOWE

06/08/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: HOLLEN, CAROL  
Address: 1723 BILLY MITCHELL LOOP  
City-St-Zip: TAMPA, FL 33621

Title: D ( ) Delete  
Name: BRANTING, MICHELLE  
Address: 210 BLOOMINGFIELD DRIVE  
City-St-Zip: BRANDON, FL 33511

Title: D ( ) Delete  
Name: STIVES, CHRISTINE G  
Address: 954 HARBOUR BAY DRIVE  
City-St-Zip: TAMPA, FL 33602

Title: D ( ) Delete  
Name: PATCH, KELLY  
Address: 7913F TINKER STREET  
City-St-Zip: TAMPA, FL 33621

Title: D (X) Delete  
Name: MORIARTY, CINDY  
Address: 2106 MCCLELLAND AVE  
City-St-Zip: TAMPA, FL 33621

Title: D (X) Delete  
Name: ZEIGLER, CHEREE  
Address: 2824 WEST SHELTON AVE  
City-St-Zip: TAMPA, FL 33611

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

Title: D (X) Change ( ) Addition  
Name: HOWE, ALICE  
Address: 2104 MCCLELLAND AVE  
City-St-Zip: TAMPA, FL 33621

Title: D (X) Change ( ) Addition  
Name: WOLF, SAMANTHA  
Address: P O BOX 6348  
City-St-Zip: TAMPA, FL 33511

Title: D (X) Change ( ) Addition  
Name: FRANCIS, LISA  
Address: P O BOX 6248  
City-St-Zip: TAMPA, FL 33608

Title: D (X) Change ( ) Addition  
Name: CLINKSCALES, VERONICA  
Address: P O BOX 6248  
City-St-Zip: TAMPA, FL 33608

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: ALICE A. HOWE

PRES

06/08/2009

Electronic Signature of Signing Officer or Director

Date