2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Nov 20, 2008
Secretary of State

DOCUMENT# N06000002359

Entity Name: SOUTHWEST FLORIDA LACROSSE ASSOCIATION, INC.

Current Principal Place of Business:

351 PIRATES BIGHT
NAPLES, FL 34103

New Principal Place of Business:

Current Mailing Address:

351 PIRATES BIGHT
NAPLES, FL 34103

New Mailing Address:

FEI Number: 20-4657870 **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:

LANGE, CHARLES
753 109TH AVE. N.
NAPLES, FL 34108 US

Name and Address of New Registered Agent:

BUONOCORE, GERALD
4113 SW 20TH AVE
CAPE CORAL, FL 33914 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: GERALD BUONOCORE 11/20/2008
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: FRIEDMANN, MICHAEL
Address: 351 PIRATES BIGHT
City-St-Zip: NAPLES, FL 34103

Title: SD ( ) Delete
Name: CLARKE, GOEFFREY
Address: 4155 CRAYTON RD. #103
City-St-Zip: NAPLES, FL 34103

Title: TD ( ) Delete
Name: LANGE, CHARLES
Address: 753 109TH AVE. N.
City-St-Zip: NAPLES, FL 34108

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: TD (X) Change ( ) Addition
Name: BUONOCORE, GERALD
Address: 4113 SW 20TH AVE
City-St-Zip: CAPE CORAL, FL 33914

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: GERALD BUONOCORE TD 11/20/2008
Electronic Signature of Signing Officer or Director Date