2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Oct 02, 2009
Secretary of State

DOCUMENT# N06000002731

Entity Name: DESTIN CHARITY WINE AUCTION FOUNDATION, INC.

Current Principal Place of Business:

4476 LEGENDARY DRIVE
SUITE 203
DESTIN, FL 32541

New Principal Place of Business:

Current Mailing Address:

4476 LEGENDARY DRIVE
SUITE 203
DESTIN, FL 32541

New Mailing Address:

FEI Number: 29-4475403 **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:

VUCOVICH, TODD
4476 LEGENDARY DR STE 203
32541, FL 32541 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: TODD VUCOVICH
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: DIR ( ) Delete
Name: VUCOVICH, TODD
Address: 4476 LEGENDARY DRIVE, SUITE 203
City-St-Zip: DESTIN, FL 32541

Title: PRES ( ) Delete
Name: CARTER, JOAN
Address: 4476 LEGENDARY DRIVE, SUITE 203
City-St-Zip: DESTIN, FL 32541

Title: PRES ( ) Delete
Name: CARTER, STEVE
Address: 4476 LEGENDARY DRIVE, SUITE 203
City-St-Zip: DESTIN, FL 32541

Title: C (X) Delete
Name: CONERLY JR, LAMAR A ESQ
Address: 4481 LEGENDARY DR STE 200
City-St-Zip: DESTIN, FL 32541

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: CHAI (X) Change ( ) Addition
Name: CARTER, JOAN
Address: 4476 LEGENDARY DRIVE, SUITE 203
City-St-Zip: DESTIN, FL 32541

Title: PRES (X) Change ( ) Addition
Name: MOHYLSKY, PETER
Address: 4476 LEGENDARY DRIVE, SUITE 203
City-St-Zip: DESTIN, FL 32541

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: TODD VUCOVICH DIR 10/02/2009
Electronic Signature of Signing Officer or Director — Date