2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000002863

FILED Feb 10, 2008 Secretary of State

Entity Name: NORTH AMERICAN WOODSBALL LEAGUE, INC.

Current Principal Place of Business: New Principal Place of Business:

3888 TOWNSEND BLVD 13499 OPUS RD

JACKSONVILLE, FL 32277 BRYCEVILLE, FL 32009

Current Mailing Address: New Mailing Address:

3888 TOWNSEND BLVD 13499 OPUS RD

JACKSONVILLE, FL 32277 BRYCEVILLE, FL 32009

FEI Number: 20-2134873 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: Name and Address of New Registered Agent:

MOFFO, JOSEPH JR
3888 TOWNSEND BLVD

MOFFO, JOSEPH JR
13499 OPUS RD

JACKSONVILLE, FL 32277 US BRYCEVILLE, FL 32277 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: JOSEPH MOFFO JR. 02/10/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: CEO (X) Change () Addition Name: MOFFO, JOSEPH JR. Name: MOFFO, JOSEPH JR.

 Name:
 MOFFO, JOSEPH JR.
 Name:
 MOFFO, JOSEPH JR.

 Address:
 3888 TOWNSEND BLVD
 Address:
 13499 OPUS RD

 City-St-Zip:
 JACKSONVILLE, FL 32277
 City-St-Zip:
 BRYCEVILLE, FL 32009

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 CALIBRONE, MARK T
 Name:
 HODGES, CHARLES

 Address:
 11791 WATTLE TREE RD N.
 Address:
 350 FOXTAIL LN

 City-St-Zip:
 JACKSONVILLE, FL 32246
 City-St-Zip:
 MIDDLEBURG, FL 32050

Title: CFO () Change (X) Addition

 Name:
 Name:
 LAROCCO, ARRON

 Address:
 Address:
 3566 GILMORE HEIGHTS RD N

 City-St-Zip:
 City-St-Zip:
 JACKSONVILLE, FL 32225

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: JOSEPH MOFFO JR. CEO 02/10/2008