

# 2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000008982

**FILED**  
**Oct 24, 2007**  
**Secretary of State**

**Entity Name:** EAST MIMS CIVIC LEAGUE INC.

**Current Principal Place of Business:**

2773 HICKORY AVE  
MIMS, FL 32754

**New Principal Place of Business:**

2609 HARRY T> MOORE AVE  
MIMS, FL 32754

**Current Mailing Address:**

2773 HICKORY AVE  
MIMS, FL 32754

**New Mailing Address:**

2609 HARRY T. MOORE AVE  
MIMS, FL 32754

**FEI Number:** 56-2610322      **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:**

SEIGLER, DWIGHT  
2773 HICKORY AVE  
MIMS, FL 32754    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: DWIGHT SEIGLER

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P      ( ) Delete  
Name: SEIGLER, DWIGHT  
Address: 2773 HICKORY AVE  
City-St-Zip: MIMS, FL 32754

Title: VP      ( ) Delete  
Name: IMPARATO, MICHAEL  
Address: 2701 ORANGE AVE  
City-St-Zip: MIMS, FL 32754

Title: S      ( ) Delete  
Name: DENNIS, ADRIANNE  
Address: 2720 HARRY T MOORE AVE  
City-St-Zip: MIMS, FL 32754

Title: T      ( ) Delete  
Name: ADDISON, WILLE  
Address: 2609 HARRY T MOORE  
City-St-Zip: MIMS, FL 32754

Title: FS      ( ) Delete  
Name: BOATWRIGHT, ELOISE  
Address: 2382 HARRY T MOORE AVE  
City-St-Zip: MIMS, FL 32754

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

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

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

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

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: WILLIE ADDISON

T

10/24/2007

Electronic Signature of Signing Officer or Director

Date