2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N07000001729

FILED Nov 30, 2008 Secretary of State

Entity Name: SOUTHWEST HISTORICAL ORGANIZATION OF RESOURCES AND EDUCATION, INC. **Current Principal Place of Business: New Principal Place of Business:** 604 W. PERRY STREET ENGLEWOOD, FL 34223 **Current Mailing Address: New Mailing Address:** 604 W. PERRY STREET P.O. BOX 212 ENGLEWOOD, FL 34295 ENGLEWOOD, FL 34223 FFI Number: FEI Number Applied For (X) 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: Name and Address of New Registered Agent: DAILEY NUGENT, BETTY J 604 W. PERRY STREET ENGLEWOOD, FL 34223 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: BETTY J. DAILEY NUGENT Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition DAILEY NUGENT, BETTY J Name: Name: Address: 604 W. PERRY STREET Address: City-St-Zip: ENGLEWOOD, FL 34223 City-St-Zip: Title: () Delete Title: () Change () Addition Name: POLLARD, JIM Name: Address: 720 SUNCREST LANE Address: City-St-Zip: ENGLEWOOD, FL 34223 City-St-Zip: Title: () Delete Title: () Change () Addition POLLARD, MARSHA N Name: Name: 720 SUNCREST LANE Address: Address: City-St-Zip: ENGLEWOOD, FL 34223 City-St-Zip: Title: () Delete Title: () Change () Addition MIHANEY, LORI-NAN Name: Name: Address: 741 W. PERRY ST Address: City-St-Zip: ENGLEWOOD, FL 34223 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: JAMES L. POLLARD V 11/30/2008