

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N07000005133

FILED
Sep 29, 2009
Secretary of State

Entity Name: BROTHERHOOD OF MEN MENTOR GROUP, INC

Current Principal Place of Business:

3880 CARMICHAEL AVE
SARASOTA, FL 34234

New Principal Place of Business:

Current Mailing Address:

3880 CARMICHAEL AVE
SARASOTA, FL 34234

New Mailing Address:

FEI Number: 26-0228550 **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:

FITCH, DWIGHT
9122 16TH AVE CIR NW
BRADENTON, FL 34209 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: DWIGHT FITCH

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: HARRIS, DOMINIC D
Address: 3880 CARMICHAEL AVE
City-St-Zip: SARASOTA, FL 34234

Title: VICE () Delete
Name: STANDIFER, EMANUEL
Address: 3880 CARMICHAEL AVE
City-St-Zip: SARASOTA, FL 34234

Title: TREA () Delete
Name: FITCH, DWIGHT L
Address: 9122 16TH AVE CIRCLE NW
City-St-Zip: BRADENTON, FL 34209

Title: SEC () Delete
Name: WATERS, KOREY
Address: 3880 CARMICHAEL AVE
City-St-Zip: SARASOTA, FL 34234

Title: OPER () Delete
Name: NUNN, JAMES
Address: 3880 CARMICHAEL AVE
City-St-Zip: SARASOTA, FL 34234

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: DWIGHT FITCH

TREA

09/29/2009

Electronic Signature of Signing Officer or Director

Date