

# 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N07000005400

FILED  
Oct 14, 2009  
Secretary of State

Entity Name: DAVE ANDREYCHUK FOUNDATION, INC.

**Current Principal Place of Business:**

18130 LONGWATER RUN DRIVE  
TAMPA, FL 33647

**New Principal Place of Business:**

**Current Mailing Address:**

18130 LONGWATER RUN DRIVE  
TAMPA, FL 33647

**New Mailing Address:**

19046 BRUCE B DOWNS BLVD  
#71  
TAMPA, FL 33647

FEI Number: 14-1999900

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CFRA, LLC  
4221 W. BOY SCOUT BLVD SUITE 1000  
TAMPA, FL 33607 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: CRISTIN A. CONLEY

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: ANDREYCHUK, DAVE  
Address: 18130 LONGWATER RUN DRIVE  
City-St-Zip: TAMPA, FL 33647

Title: D ( ) Delete  
Name: ANDREYCHUK, JULIAN  
Address: 18130 LONGWATER RUN DRIVE  
City-St-Zip: TAMPA, FL 33647

Title: D ( ) Delete  
Name: WOODRUFF, KAM  
Address: 18130 LONGWATER RUN DRIVE  
City-St-Zip: TAMPA, FL 33647

**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:

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: DAVE ANDREYCHUK

DIR.

10/14/2009

Electronic Signature of Signing Officer or Director

Date