2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Oct 12, 2009
Secretary of State

DOCUMENT# N08000001315

Entity Name: THE A.R.F. SHACK, INC.

Current Principal Place of Business:

11508 STAGBURY DR.
ORLANDO, FL 32832

New Principal Place of Business:

10524 MOSS PARK RD
204
ORLANDO, FL 32832

Current Mailing Address:

11508 STAGBURY DR.
ORLANDO, FL 32832

New Mailing Address:

10524 MOSS PARK RD
204
ORLANDO, FL 32832

FEI Number: 26-1948744 **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:

HEWLINGS, SUSAN J.
11508 STAGBURY DR.
ORLANDO, FL 32832 US

Name and Address of New Registered Agent:

HEWLINGS, SUSAN J.
11508 STAGBURY DR
ORLANDO, FL 32832 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: SUSAN J HEWLINGS 10/12/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: HEWLINGS, SUSAN J.
Address: 11508 STAGBURY DR.
City-St-Zip: ORLANDO, FL 32832

Title: D ( ) Delete
Name: SHUMAN, DAVID L.
Address: 11508 STAGBURY DR.
City-St-Zip: ORLANDO, FL 32832

Title: D ( ) Delete
Name: HICKMAN, ERIC
Address: 107 W 7TH AVE
City-St-Zip: TALLAHASSEE, FL 32303

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: SUSAN J HEWLINGS D 10/12/2009
Electronic Signature of Signing Officer or Director Date