2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N08000005378

Entity Name: FLORIDA ATHLETIC ACADEMY, INC.

FILED Nov 05, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

388 FIELDSTREAM BLVD WEST 630 PALM BAY COURT

ORLANDO, FL 32825 US APT 203

ORLANDO, FL 32825 US

Current Mailing Address: New Mailing Address:

PO BOX 570004

ORLANDO, FL 32857 US

FEI Number: 30-0489293 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:

GALLIMORE, JAIRO
388 FIELDSTREAM BLVD WEST
ORLANDO, FL 32825 US
GALLIMORE, JAIRO
630 PALM BAY COURT
APT 203
ORLANDO, FL 32825 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: JAIRO GALLIMORE 11/05/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

le: PSD () Delete Title: PSD (X) Change () Addition

Name: GALLIMORE, JAIRO

Address: 388 FIELDSTREAM BLVD WEST

Address: 630 PALM BAY COURT APT 203

City-St-Zip: ORLANDO, FL 32825 US City-St-Zip: ORLANDO, FL 32825 US

Title: V () Delete Title: () Change () Addition

 Name:
 SENAY, MICHAEL
 Name:

 Address:
 1538 INDIAN HEAD TRL
 Address:

 City-St-Zip:
 ORLANDO, FL 32828 US
 City-St-Zip:

 Name:
 GALLIMORE, REBECA
 Name:
 GALLIMORE, GENEVA

 Address:
 PO BOX 570004
 Address:
 PO BOX 570004

 City-St-Zip:
 ORLANDO, FL 32857 US
 City-St-Zip:
 ORLANDO, FL 32857 US

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: JAIRO GALLIMORE PSD 11/05/2009