

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N08000011175

FILED
Oct 09, 2009
Secretary of State

Entity Name: ARGYLE FOREST YOUTH SPORTS ASSOCIATION INC.

Current Principal Place of Business:

8578 BERESFORD LANE
JACKSONVILLE, FL 32244

New Principal Place of Business:

Current Mailing Address:

8578 BERESFORD LANE
JACKSONVILLE, FL 32244

New Mailing Address:

FEI Number: 94-3458803 **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:

WRIGHT, CLAUDE X
8578 BERESFORD LANE
JACKSONVILLE, FL 32244 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: CLAUDE X. WRIGHT

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WRIGHT, CLAUDE X
Address: 8578 BERESFORD LANE
City-St-Zip: JACKSONVILLE, FL 32244

Title: VP () Delete
Name: MCDONALD, TONY
Address: PO BOX 8811
City-St-Zip: JACKSONVILLE, FL 32239

Title: ST () Delete
Name: WRIGHT, RADICA
Address: 8578 BERESFORD LANE
City-St-Zip: JACKSONVILLE, FL 32244

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: ST (X) Change () Addition
Name: SNYDER, KANICE
Address: PO BOX 2945
City-St-Zip: JACKSONVILLE, FL 32203

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: CLAUDE X. WRIGHT

P

10/09/2009

Electronic Signature of Signing Officer or Director

Date