## 2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N08197

FILED Jul 31, 2008 Secretary of State

Entity Name: TAMPA BAY SOARING SOCIETY, INC.

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

40223 SUN PATH AVE ZEPHYRHILLS, FL 33540

Current Mailing Address: New Mailing Address:

6259 7TH AVENUE S 1120 E KENNEDY BLVD SAINT PETERSBURG, FL 33707 1430

TAMPA, FL 33602

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

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

PATTON, BRUCE E
22947 COLLRIDGE DRIVE
LAND O LAKES, FL 34639 US
PATTON, BRUCE E
1120 E KENNEDY BLVD
1430
TAMPA, FL 33602 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: BRUCE PATTON 07/31/2008

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: PD ( ) Delete Title: PD (X) Change( ) Addition

 Name:
 CHIPMAN, DR. HOWARD M.D.
 Name:
 SUTTON, RON

 Address:
 510 SHORE DRIVE E.
 Address:
 9818 DIDFTIKSON AVE

City-St-Zip: SAINT PETERSBURG, FL 33703 City-St-Zip: NEW PORT RICHEY, FL 34655

Title: VPD () Delete Title: () Change () Addition Name: THOMASSON, DON Name:

 Name:
 THOMASSON, DON
 Name:

 Address:
 509 55TH AVE
 Address:

 City-St-Zip:
 ST. PETE BCH, FL 33706
 City-St-Zip:

 $\label{eq:title:sde} {\sf Title:} \qquad {\sf SD} \qquad (\ ) \, {\sf Delete} \qquad \qquad {\sf Title:} \qquad {\sf SD} \qquad ({\sf X}) \, {\sf Change} \, (\ ) \, {\sf Addition}$ 

Name: SCHRADER, CHRIS Name: RIERSON, ROB

 Address:
 203 APACHE STREET
 Address:
 9012 NOTCHWOOD COURT

 City-St-Zip:
 TAVERNIER, FL 33070
 City-St-Zip:
 ORLANDO, FL 32825

Title: TD () Delete Title: TD (X) Change () Addition

 Name:
 PATTON, BRUCE E
 Name:
 PATTON, BRUCE E

 Address:
 22947 COLLRIDGE DRIVE
 Address:
 1120 E KENNEDY BLVD

 City-St-Zip:
 LAND O LAKES, FL 34639
 City-St-Zip:
 TAMPA, FL 33602

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: BRUCE PATTON TD 07/31/2008