

# **2013 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N09000009634

**FILED**  
**Oct 09, 2013**  
**Secretary of State**

**Entity Name:** TOMLIN FFA ALUMNI, INC

**Current Principal Place of Business:**

501 WOODROW WILSON  
PLANT CITY, FL 33563

**New Principal Place of Business:**

**Current Mailing Address:**

501 WOODROW WILSON  
PLANT CITY, FL 33563

**New Mailing Address:**

**FEI Number:** 27-1059953

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

STEWARD, JASON  
501 WOODROW WILSON  
PLANT CITY, FL 33563 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:** JASON STEWARD

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** CONRAD, STEPHANIE  
**Address:** 9268 GALLAGHER RD  
**City-St-Zip:** DOVER, FL 33527

**Title:** S  
**Name:** SANDERS, TINA  
**Address:** 501 WOODROW WILSON  
**City-St-Zip:** PLANT CITY, FL 33563

**Title:** T  
**Name:** VANDERFORD, DARBI  
**Address:** 501 WOODROW WILSON  
**City-St-Zip:** PLANT CITY, FL 33563

**Title:** VP  
**Name:** RILEY, HEATHER  
**Address:** 501 WOODROW WILSON  
**City-St-Zip:** PLANT CITY, FL 33563

I hereby 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 all other like empowered.

**SIGNATURE:** DARBI VANDERFORD

T

10/09/2013

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date