

# 2012 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N11000001464

FILED  
Oct 11, 2012  
Secretary of State

**Entity Name:** THE ROYAL BLUE PHOENIX FOUNDATION CORPORATION

**Current Principal Place of Business:**

2718 CALLISTA CT #204  
NAPLES, FL 34114

**New Principal Place of Business:**

2718 CALLISTA CT #204  
NAPLES, FL 34114 UN

**Current Mailing Address:**

2718 CALLISTA CT #204  
NAPLES, FL 34114

**New Mailing Address:**

2718 CALLISTA CT #204  
NAPLES, FL 34114 UN

**FEI Number:** 27-4719795

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HOOVER, DAVID L  
2718 CALLISTA CT #204  
NAPLES, FL 34114 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: DAVID L. HOOVER

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DO  
Name: HOOVER, DAVID L  
Address: 2718 CALLISTA CT #204  
City-St-Zip: NAPLES, FL 34114

Title: DO  
Name: HOOVER, LINDA  
Address: 2718 CALLISTA CT #204  
City-St-Zip: NAPLES, FL 34114

Title: DO  
Name: HOOVER, COUTNEY  
Address: 2718 CALLISTA CT #204  
City-St-Zip: NAPLES, FL 34114

Title: DO  
Name: HOOVER, RYAN  
Address: 2718 CALLISTA CT #204  
City-St-Zip: NAPLES, FL 34114

Title: DO  
Name: HOOVER, BRANDON  
Address: 2718 CALLISTA CT #204  
City-St-Zip: NAPLES, FL 34114

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: DAVID L. HOOVER

DO

10/11/2012

Electronic Signature of Signing Officer or Director

Date