2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N12139

FILED Oct 11, 2007 Secretary of State

Entity Name: JAYCEES FOUNDATION OF NAPLES, INC.

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

2950 64TH STREET S.W. 2424 DAVIS BLVD

NAPLES, FL 34116 US

NAPLES, FL 34104 US

Current Mailing Address: New Mailing Address:

P.O. BOX 7721 P.O. BOX 7721

NAPLES, FL 34101 NAPLES, FL 341017721 US

FEI Number: 65-0047226 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:

MORAN, DAVID 4762 CAPRI DRIVE NAPLES, FL 34103 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: DAVID MORAN

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 DOUGLAS, WILLIAM
 Name:
 DOUGLASS, WILLIAM

 Address:
 600 ST ANDREWS BLVD
 Address:
 600 ST ANDREWS BLVD

 City-St-Zip:
 NAPLES, FL 341138974
 City-St-Zip:
 NAPLES, FL 341138974 US

Title: D () Delete Title: S (X) Change () Addition
Name: DOUGLASS, LISA Name: DOUGLASS, LISA

Address: 600 ST ANDREWS BLVD
City-St-Zip: NAPLES, FL 341138974
Address: 600 ST ANDREWS BLVD
City-St-Zip: NAPLES, FL 341138974 US

 $\label{eq:title:title:VP} \mbox{Title:} \mbox{ VP } \mbox{() Delete} \mbox{ Title: VP } \mbox{(X) Change () Addition}$

 Name:
 TURNER, WIN
 Name:
 TURNER, WIN

 Address:
 45 LIBERTY LANE
 45 LIBERTY LANE

 City-St-Zip:
 NAPLES, FL 34112
 City-St-Zip:
 NAPLES, FL 34112 US

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

 Name:
 MORAN, DAVE,
 Name:
 MORAN, DAVID

 Address:
 4762 CAPRI DR.
 Address:
 PO BOX 10228

City-St-Zip: NAPLES, FL 34103 City-St-Zip: NAPLES, FL 341010228 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: DAVID MORAN P 10/11/2007