

# **2014 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N13000006588

**FILED**  
**Oct 01, 2014**  
**Secretary of State**

**Entity Name:** HISTORIC BROOKSVILLE WOOD TURNERS INC.

**Current Principal Place of Business:**

131 S. MAIN ST.  
BROOKSVILLE, FL 34601

**New Principal Place of Business:**

**Current Mailing Address:**

131 S. MAIN ST.  
BROOKSVILLE, FL 34601

**New Mailing Address:**

609 LAMAR AVE.  
BROOKSVILLE, FL 34601

**FEI Number:** 46-3272470

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LEE, JAMES  
609 LAMAR AVE  
BROOKSVILLE, FL FL34601 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:** JAMES LEE

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

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** LEE, JAMES  
**Address:** 609 LAMAR AVE.  
**City-St-Zip:** BROOKSVILLE, FL 34601

**Title:** SD  
**Name:** JONES, CHESTER  
**Address:** 609 LAMAR AVE.  
**City-St-Zip:** BROOKSVILLE, FL 34601

**Title:** TD  
**Name:** LEE, PETRA  
**Address:** 609 LAMAR AVE.  
**City-St-Zip:** BROOKSVILLE, FL 34601

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:** JAMES LEE

PD

10/01/2014

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

\_\_\_\_\_  
Date