

# 2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

<b>DOCUMENT # N15411</b> 1. Entity Name <b>NATIONAL CONFERENCE OF FIREMEN AND OILERS LOCAL 1220 AFLCIO SEIU CLC, INC.</b>			FILE 06 OCT 27 PM 5:07 SEC. 1 TALLAH.
Principal Place of Business <b>C/O FREDERICK D. WINTERS 1243 CENTRAL AVENUE ST. PETERSBURG, FL 33705</b>		Mailing Address <b>POST OFFICE BOX 10157 ST. PETERSBURG, FL 33733-0157</b>	
2. Principal Place of Business <b>7850 Ulmerton Rd</b> Suite, Apt. #, etc. <b>9</b>		3. Mailing Address <b>7850 Ulmerton Rd</b> Suite, Apt. #, etc. <b>9</b>	
City & State <b>Largo, FL</b>		City & State <b>Largo, FL</b>	
Zip <b>33771</b>		Zip <b>33771</b>	
Country <b>FLORIDA</b>		Country <b>FLORIDA</b>	
4. FEI Number <b>23-7347454</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent <b>WINTERS, FREDERICK D. 1243 CENTRAL AVENUE ST. PETERSBURG, FL 33705</b>		7. Name and Address of New Registered Agent Name <b>DERRICK HAMILTON</b> Street Address (P.O. Box Number is Not Acceptable) <b>7850 Ulmerton Rd #9</b> City <b>Largo</b> FL Zip Code <b>33771</b>	
8. 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. I am familiar with, and accept the obligations of registered agent. * <b>Derrick Hamilton</b> SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____			
<b>FILE NOW!!! FEE IS \$236.25</b> <b>After January 1, 2007, Fee will be \$297.50</b>		<b>Make check payable to</b> <b>Florida Department of State</b>	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P <b>WINTERS, FREDERICK D</b> <b>664 63RD STREET SOUTH</b> <b>ST. PETERSBURG, FL 33707</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>TRUSTEE</b> <b>DERRICK HAMILTON</b> <b>7850 ULMER TON RD. STE 9</b> <b>LARGO, FL 33771</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP <b>CLAY, ROGER</b> <b>1710 SANDERLING COURT</b> <b>BRANDON, FL 33511</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	600081274296 10/27/06--01026--003 **236.25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST <b>PATRICK, MARK</b> <b>11675 9TH AVENUE NORTH, #3</b> <b>ST. PETERSBURG, FL 33746</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	600081274296 10/27/06--01026--003 **236.25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	RS <b>BEDRON, JOHN</b> <b>3057 CREST DRIVE</b> <b>CLEARWATER, FL 33759</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	600081274296 10/27/06--01026--003 **236.25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: * <b>Derrick Hamilton</b> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		10/23/06 Date Daytime Phone #	