## 2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N15696

FILED Nov 13, 2007 Secretary of State

Entity Name: THE SOUTHERNMOST CHAPTER OF THE UNITED STATES COAST GUARD CHIEF PETTY OFFICERS

ASSOCIATION, INC.

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

SOUTHERN MOST CPOA USCG SECTOR KEY WEST KEY WEST, FL 33040

Current Mailing Address: New Mailing Address:

SOUTHERN MOST CPOA USCG SECTOR KEY WEST KEY WEST, FL 33040

FEI Number: 52-1268687 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:

CAICEDO, JOHN H
USCG SECTOR KEY WEST
TRUMBO ROAD
KEY WEST, FL 33040 US

PLUNK, WILLIAM F
USCG SECTOR KEY WEST
TRUMBO ROAD
KEY WEST, FL 33040 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: WILLIAM F. PLUNK 11/13/2007

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 WILLIAMS, JOHN
 Name:
 RISER, DAVID

 Address:
 USCGC SAWFISH
 Address:
 USCG SECTOR KEY WEST

City-St-Zip: KEY WEST, FL 33040 City-St-Zip: KEY WEST, FL 33040

Title: VP ( ) Delete Title: ( ) Change ( ) Addition Name: GLIDEWELL, JEFF Name:

Address: USCG SECTOR Address: City-St-Zip: KEY WEST, FL 33040 City-St-Zip:

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

 Name:
 WOODS, JOHN
 Name:
 PLUNK, WILLIAM

 Address:
 USCG SECTOR
 Address:
 USCGC SAWFISH

 City-St-Zip:
 KEY WEST, FL 33040
 City-St-Zip:
 KEY WEST, FL 33040

Title: SD () Delete Title: () Change () Addition

 Name:
 MCLEOD, JOSEPH
 Name:

 Address:
 USCG SECTOR
 Address:

 City-St-Zip:
 KEY WEST, FL 33040
 City-St-Zip:

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: WILLIAM F. PLUNK TD 11/13/2007