## 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N19525

Entity Name: POLYWOGS, INC.

FILED Apr 29, 2009 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:	
	STREET NORTH		
STE 120 ST. PETER	RSBURG, FL 33702		
Current Mailing Address:		New Mailing Address:	
2110-4TH	ΓGASSNER ST. N. RSBURG BCH., FL 33706		
In accordan	ce with s. 607.193(2)(b), F.S., the corporation did not receive	<del>-</del>	,,
	I Address of Current Registered Agent:	Name and Add	ress of New Registered Agent:
<b>597 CORE</b>	SS, ROBERT A. EY AVE RSBURG BEACH, FL 33706 US		
	named entity submits this statement for the purpos e of Florida.	e of changing its req	gistered office or registered agent, or both,
SIGNATUR	RE: ROBERT A DOUGLASS		
	Electronic Signature of Registered Agent		Date
OFFICER	S AND DIRECTORS:	ADDITIONS/CI	HANGES TO OFFICERS AND DIRECTORS
Title: Name: Address: City-St-Zip:	PD ( ) Delete THOMPSON, JAMES B 700 GENERAL AVE. 5TH FL ST. PETERSBURG, FL 33701	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	VT () Delete GASSNER, ELLIOTT S 9400-4TH STREET NORTH, STE 120 ST. PETERSBURG, FL 33702	Title: Name: Address: City-St-Zip:	()Change ()Addition
Title: Name: Address: City-St-Zip:	SD ( ) Delete HOPE, RICHARD 800-14TH AVE NORTH ST. PETERSBURG, FL 33701	Title: Name: Address: City-St-Zip:	()Change ()Addition
Title: Name: Address: City-St-Zip:	D ( ) Delete GOFORTH, DEL 220 PASADENA AVE SOUTH ST. PETERSBURG, FL 33707	Title: Name: Address: City-St-Zip:	()Change ()Addition
Title: Name: Address: City-St-Zip:	D () Delete FROST, JACK 13575 58TH STREET NO. #154 CLEARWATER, FL 33760	Title: Name: Address: City-St-Zip:	()Change ()Addition
Title: Name: Address: City-St-Zip:	D () Delete ROBINSON, KEITH 6735 CROSSWINDS DR NO ST PETERSBURG, FL 33710	Title: Name: Address: City-St-Zip:	()Change ()Addition

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: ELLIOTT S. GASSNER VT 04/29/2009