2012 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N19525

Entity Name: POLYWOGS, INC.

FILED Dec 03, 2012 Secretary of State

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

9400-4TH STREET NORTH 220 PASADENA AVENUE SOUTH STE 120 ST. PETERSBURG, FL 33716

ST. PETERSBURG, FL 33702

Current Mailing Address: New Mailing Address:

9400-4TH STREET NORTH
STE 120

220 PASADENA AVENUE SOUTH
ST. PETERSBURG, FL 33716

ST. PETERSBURG, FL 33716 ST. PETERSBURG, FL 33702

FEI Number: 59-2602598 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

DOUGLASS, ROBERT A.

220 PASADENA AVE SO

ST. PETERSBURG, FL 33707 US

LAFALCE, FRANK A ESQUIRE
201 N. FRANKLIN STREET
SUITE 2800
TAMPA, FL 33602 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: FRANK A. LAFALCE, ESQUIRE 12/03/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DT

 Name:
 ELLIOTT, GASSNER S

 Address:
 9400 4TH ST NO STE 120

 City-St-Zip:
 ST. PETERSBURG, FL 33702

Title: PD

 Name:
 GOFORTH, DEL

 Address:
 220 PASADENA AVE SO

 City-St-Zip:
 ST. PETERSBURG, FL 33716

Title:

 Name:
 HOPE, RICHARD

 Address:
 800-14TH AVE NORTH

 City-St-Zip:
 ST. PETERSBURG, FL 33701

Title: D Name: LEE, F.H

Address: 220 PASADENA AVE SOUTH
City-St-Zip: ST. PETERSBURG, FL 33707

Title: [

Name: FROST, JACK

Address: 13575 58TH STREET NO. #154 City-St-Zip: CLEARWATER, FL 33760

Title: SD

 Name:
 ROBINSON, KEITH

 Address:
 6735 CROSSWINDS DR NO

 City-St-Zip:
 ST PETERSBURG, FL 33710

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: DEL GOFORTH P 12/03/2012