2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N20081

Apr 21, 2009 Secretary of State

Entity Name: FIRST CITY ARTS ALLIANCE, INC.

Current Principal Place of Business:

New Principal Place of Business:

401 NORTH REUS STREET PENSACOLA, FL 32501

Current Mailing Address:

New Mailing Address:

226 S. PALAFOX STE. 204 PENSACOLA, FL 32501

401 NORTH REUS STREET PENSACOLA, FL 32501

FEI Number: 59-2787230 FEI Number Applied For () FEI Number Not Applicable () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

RICHARDS, NEIL 4430 YOUPON ROAD PENSACOLA, FL 32526 US DAVIS, BRADLEY 1701 É BLOUNT ST.

PENSACOLA, FL 32503 US

BAILEY, DAVID

BRUNO, PAUL

P.O. BOX 228

DAVIS, BRADLEY

1701 E. BLOUNT ST.

17 MANOR DRIVE

PENSACOLA, FL 32507

PENSACOLA, FL 32591

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.

Name:

Title:

Title:

Name:

Address:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

Address:

City-St-Zip:

SIGNATURE: BRADLEY DAVIS, JR.

04/21/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition

(X) Change () Addition

(X) Change () Addition

() Delete ORTEZ-MIGUEZ, MICHELLE Name: Address:

319 WEST DESOTO STREET City-St-Zip: PENSACOLA, FL 32501

Title: () Delete Name: BAILEY, DAVID Address: 17 MANOR DRIVE City-St-Zip: PENSACOLA, FL 32507

Title: () Delete MILSOP, FRAN Name:

422 WEST GREGORY STREET Address: City-St-Zip: PENSACOLA, FL 32501

Title: () Delete RICHARDS, NEIL Name: 4430 YOUPON ROAD Address:

City-St-Zip:

PENSACOLA, FL 32526

Title: (X) Change () Addition Name: CALLIOUET, CLYDE P.O. BOX 30412

PENSACOLA, FL 32503

City-St-Zip: PENSACOLA, FL 32591

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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: BRADLEY DAVIS, JR.

04/21/2009