2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N20365

FILED Nov 02, 2008 Secretary of State

Entity Name: TAMPA BAY CHAPTER OF THE SOCIETY OF FINANCIAL SERVICE PROFESSIONALS, INC.

Current Principal Place of Business:

New Principal Place of Business:

4010 CYPRESS WILLOW CT TAMPA, FL 33614

Current Mailing Address:

New Mailing Address:

C/O THOMAS A. ROMAN P.O. BOX 21732 TAMPA, FL 33622 US P.O. BOX 21732 TAMPA, FL 33622 US

FEI Number: 59-2824939

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 New Registered Agent:

DORREMAN, ELAINE 4010 CYPRESS WILLOW CT TAMPA, FL 33614

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: ELAINE DORREMAN

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete COLEMAN, ROBERT Name: 1511 N. WESTSHORE BLVD Address:

City-St-Zip: TAMPA, FL 33607

Title: () Delete GRIEB, ROBERT Name: Address: 500 N. WESTSHORE #700 City-St-Zip: TAMPA, FL 33609

Title: () Delete TANNAHILL, BRUCE Name:

570 CARILLON PKWY Address: City-St-Zip: ST. PETERSBURG, FL 33716

Title: () Delete Name: JOHNSON, LESLIE 1511 N. WESTSHORE BLVD Address: City-St-Zip: TAMPA, FL 33607

Title: () Delete ALFORD, JAYNE Name: 10504 LACERA DR. Address: City-St-Zip: TAMPA, FL 33618

Title: () Delete MOUCH, ADRIENNE Name: Address: 1715 N. WESTSHORE BLVD.

City-St-Zip:

TAMPA, FL 33607

(X) Change () Addition

JOHNSON, LESLIE Name: Address: 1511 N. WESTSHORE BLVD

TAMPA, FL 33607

City-St-Zip:

Title: (X) Change () Addition

Name: ALFORD, JAYNE Address: 10504 LACERA DR. City-St-Zip: TAMPA, FL 33618

Title: (X) Change () Addition

LEE, ROBERT Name: 4010 BOY SCOUT BLVD Address: City-St-Zip: TAMPA, FL 33607

Title: (X) Change () Addition

Name: BOSWELL, SUSAN Address: 10006 N. DALE MABRY City-St-Zip: TAMPA, FL 33618

Title: (X) Change () Addition

JONAS, HOWARD Name: 570 CARILLON PKWY Address: City-St-Zip: ST. PETERSBURG, FL 33617

Title: (X) Change () Addition

ANDERSON, KURT Name:

Address: 7650 COURTNEY CAMPBELL CSWY

TAMPA, FL 33607 City-St-Zip:

SEC

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: ELAINE DORREMAN Electronic Signature of Signing Officer or Director 11/02/2008

Date