2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N29122

FILED Jun 02, 2<u>00</u>9 Secretary of State

Entity Name: OUTDOORS & ACTIVE, INC.

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

366 WINCHESTER PLACE 783 WINDWILLOW CIRCLE LONGWOOD, FL 32779 WINTER SPRINGS, FL 32708

Current Mailing Address: New Mailing Address:

P.O. BOX 948131 P.O. BOX 948131

MAITLAND, FL 327948131 MAITLAND, FL 327948131 US

FEI Number: 59-2956518 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:

HULETT, ALVAH P HALLE, ROBERTA L 366 WINCHESTER PLACE 783 WINDWILLOW CIRCLE US LONGWOOD, FL 32779 WINTER SPRINGS, FL 32708

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: ROBERTA L. HALLE 06/02/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete ABEEL, CINDY HALLE, ROBERTA L Name: Name:

903 PARK LAKE CIRCLE Address: 783 WINDWILLOW CIRCLE Address: City-St-Zip: MAITLAND, FL 32751 City-St-Zip: WINTER SPRINGS, FL 32708

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

HULETT, ALVAH Name: SHOBER, JOHN Name: Address: 366 WINCHESTER PLACE Address: 417 SUN LAKE CIR #109 City-St-Zip: LONGWOOD, F 32779 City-St-Zip: LAKE MARY, F 32746

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

ROE, SUE Name: Name: 5450 LAKE MARGARET DRIVE #1407 Address: Address: City-St-Zip: ORLANDO, FL 32812 City-St-Zip:

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

BEDNER, FRAN Name: Name: BEDNER, FRAN 1652 BERKSHIRE AVE Address: Address: 1652 BERKSHIRE AVE City-St-Zip: WINTER PARK, FL 32789 City-St-Zip: WINTER PARK, FL 32789

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

SHIENVOLD, FRAN Name: Name: 4108 LAKE UNDERHILL RD #107 Address: Address:

City-St-Zip: ORLANDO, FL 32803 City-St-Zip:

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

STRATTON, LOU ANN Name: Name: Address: 434 CITRUS LANE Address: MAITLAND, FL 32751 City-St-Zip: 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: ROBERTA L. HALLE **PRES** 06/02/2009

Electronic Signature of Signing Officer or Director

Date