2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FEI Number Applied For ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

DOCUMENT# N35468

2432 ORCHARD DRIVE

Current Mailing Address:

2432 ORCHARD DRIVE APOPKA, FL 32712 U

FEI Number: 59-2972885

BRADDY, DENNIS K

APOPKA, FL 32712

in the State of Florida.

City-St-Zip:

SIGNATURE: RICHARD WILHELM

APOPKA, FL 32712

SIGNATURE: BOB BRAATZ

above, or on an attachment with an address, with all other like empowered.

Electronic Signature of Signing Officer or Director

2432 ORĆHARD DRIVE

APOPKA, FL 32712

Current Principal Place of Business:

Name and Address of Current Registered Agent:

FILED Sep 20, 2005 Secretary of State

New Principal Place of Business:

US

US

Name and Address of New Registered Agent:

Certificate of Status Desired ()

09/20/2005

09/20/2005

Date

1625 SUMMIT LAKE DRIVE

TALLAHASSEE, FL 32317

1625 SUMMIT LAKE DRIVE

TALLAHASSEE, FL 32317

1625 SUMMIT LAKE DRIVE

TALLAHASSEE, FL 32317 US

WILHELM, RICHARD

New Mailing Address:

SUITE 300

SUITE 300

FEI Number Not Applicable ()

SUITE 300

Entity Name: ARCHITECTURAL MANUFACTURERS ASSOCIATION OF FLORIDA, INCORPORATED

Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete BRAATZ, ROBERT Name: Name: 4000 NW 110TH DR Address: Address: City-St-Zip: JASPER, FL 32052 City-St-Zip: Title: () Delete Title: () Change () Addition Name: TEMPLE, RELINA Name: Address: PO BOX 5001 Address: City-St-Zip: GREENWOOD, SC 29649 City-St-Zip: Title: () Delete Title: (X) Change () Addition DRIVER, CARL Name: COLE, FREDDIE Name: 8105 ANDERSE RD 2318 WINNING COLORS Address: Address: City-St-Zip: TAMPA, FL 33684 City-St-Zip: SAN ANTONIO, TX 78248 Title: () Delete Title: (X) Change () Addition CHAPPELL, DÉNNIS Name: BRADDY, DENNIS K Name: 2432 ORCHARD DR 1672 VALLEY DRIVE Address: Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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

VENICE, FL 34292

Ρ

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both,