

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N36356

FILED
Sep 22, 2005
Secretary of State

Entity Name: DANFORTH MASTER ASSOCIATION, INC.

Current Principal Place of Business:

3645 SW WHISPERING SOUND DRIVE
PALM CITY, FL 34990 US

New Principal Place of Business:

Current Mailing Address:

3645 SW WHISPERING SOUND DRIVE
PALM CITY, FL 34990 US

New Mailing Address:

FEI Number: 65-0789752 **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 Current Registered Agent:

BARAL, JR, THOMAS J
3645 SW WHISPERING SOUND DRIVE
PALM CITY, FL 34990 US

Name and Address of New Registered Agent:

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: THOMAS J. BARAL JR.

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DV () Delete
Name: FARMER, GUY
Address: 3662 SW WHISPERING WOUND DRIVE
City-St-Zip: PALM CITY, FL 34990

Title: DT () Delete
Name: BARAL, JR, THOMAS J
Address: 1872 SW AUTUMNWOOD WAY
City-St-Zip: PALM CITY, FL 34990

Title: DP () Delete
Name: MYERS, ROBERT M
Address: 2408 SW DANFORTH CIRCLE
City-St-Zip: PALM CITY, FL 34990

Title: D () Delete
Name: WORRALL, RICHARD
Address: 1292 SW GREENS POINTE WAY
City-St-Zip: PALM CITY, FL 34990

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: FARMER, GUY
Address: 3662 SW WHISPERING WOUND DRIVE
City-St-Zip: PALM CITY, FL 34990

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DV (X) Change () Addition
Name: AGAR, HAL
Address: 2368 SW DANFORTH CIRCLE
City-St-Zip: PALM CITY, FL 34990

Title: () Change () Addition
Name:
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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THOMAS J. BARAL JR.

Electronic Signature of Signing Officer or Director

DT

09/22/2005

Date