

2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

REINSTATEMENT 04
FILED

DOCUMENT # N37268

1. Entity Name
SEBASTIAN INLET EAGLES LADIES AUXILIARY 4067, INC.



04 NOV 15 AM 11:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

100042755811
11/15/04--01076--006 **245.00



Principal Place of Business
9606 TRADE CENTER DR.
SEBASTIAN, FL 32958 US

Mailing Address
381 FORDHAM ST
SEBASTIAN, FL 32978 US

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
9606 Trade Center Drive
Suite, Apt. #, etc.

10282004 REIN-NP CR2E099 (6/04)

City & State
Sebastian FLA

Zip
32958

Country
Indian River

4. FEI Number
59-2911237

Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
WARD, BETTY
916 LOUISIANA AVE
SEBASTIAN, FL 32958

7. Name and Address of New Registered Agent
Name
MARGARET J. Cassity
Street Address P.O. Box Number is Not Acceptable
449 Del Monte Rd APTA
City
Sebastian FL Zip Code
32958

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Margaret J. Cassity secretary 11-11-04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$236.25
After January 1, 2005, Fee will be \$297.50

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	ROBERTS, DEBRA	
STREET ADDRESS	116 KEYSTONE DR	
CITY-ST-ZIP	SEBASTIAN, FL 32958	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	RANDOLF, BILL	
STREET ADDRESS	832 LANCE ST	
CITY-ST-ZIP	SEBASTIAN, FL 32958	
TITLE	T	<input type="checkbox"/> Delete
NAME	REEVES, JANET	
STREET ADDRESS	10035 85TH ST	
CITY-ST-ZIP	SEBASTIAN, FL 32958	
TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	KUEINSKI, HELEN	
STREET ADDRESS	381 FORDHAM ST	
CITY-ST-ZIP	SEBASTIAN, FL 32958	
TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	WARD, BETTY	
STREET ADDRESS	916 LOUISIANA AVE	
CITY-ST-ZIP	SEBASTIAN, FL 32958	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	NEWBERGX, PEGGY	
STREET ADDRESS	9365 87TH ST	
CITY-ST-ZIP	VERO BEACH, FL 32967	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KATHLEEN BIGGERS	
STREET ADDRESS	8816 103RD AVE	
CITY-ST-ZIP	VERO BEACH FLA 32967	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NANCY MURRAY	
STREET ADDRESS	961 SCHUMANN DRIVE	
CITY-ST-ZIP	SEBASTIAN, FLA 32958	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MARGARET J. Cassity	
STREET ADDRESS	449 Del Monte Road APTA	
CITY-ST-ZIP	SEBASTIAN FLA 32958	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ELIZABETH Philo	
STREET ADDRESS	265 CARAVAN TERRACE	
CITY-ST-ZIP	SEBASTIAN FLA 32958	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PEGGY NEUBERGER	
STREET ADDRESS	9365 87TH STREET	
CITY-ST-ZIP	VERO BEACH FLA 32967	

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Margaret J. Cassity MARGARET J. Cassity 11-11-04 589-8979
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #