

2011 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N42379

FILED
Apr 28, 2011
Secretary of State

Entity Name: COLUMBIA COUNTY SWIM TEAM ASSOCIATION, INC.

Current Principal Place of Business:

528 WEST DUVAL STREET
LAKE CITY, FL 32055

New Principal Place of Business:

Current Mailing Address:

989 SW MOUNT CARMEL AVE
LAKE CITY, FL 32024

New Mailing Address:

PO BOX 732
LAKE CITY, FL 32056

FEI Number: 59-3057077

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MANSMANN, KEELY
1025 NE BLACKBERRY CIRCLE
LAKE CITY, FL 32055 US

Name and Address of New Registered Agent:

GREENE, MICHELE L
1543 SW CAROLINE CT
LAKE CITY, FL 32025 US

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: MICHELE L. GREENE

04/28/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: POPE, ALLEN
Address: 144 SE WILDERNESS DRIVE
City-St-Zip: LAKE CITY, FL 32025

Title: VD
Name: FIELDS, MICHELE
Address: 4580 SE COUNTRY CLUB ROAD
City-St-Zip: LAKE CITY, FL 32025

Title: SD
Name: GREENE, MICHELE
Address: 1543 SW CAROLINE COURT
City-St-Zip: LAKE CITY, FL 32025

Title: TD
Name: MANSMANN, KEELY
Address: 1025 NW BLACKBERRY CIRCLE
City-St-Zip: LAKE CITY, FL 32055

I hereby 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 all other like empowered.

SIGNATURE: MICHELE L. GREENE

SD

04/28/2011

Electronic Signature of Signing Officer or Director

Date