

# 2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N93000002301

FILED  
Oct 15, 2007  
Secretary of State

Entity Name: WINTER HAVEN STINGRAYS, INC.

**Current Principal Place of Business:**

210 CYPRESS GARDENS BLVD  
WINTER HAVEN, FL 33880 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 9002  
WINTER HAVEN, FL 338839002 US

**New Mailing Address:**

FEI Number: 59-3144663      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:**

**Name and Address of New Registered Agent:**

HOWARD, LINDA  
210 CYPRESS GARDENS BLVD  
WINTER HAVEN, FL 33880 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: LINDA HOWARD

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: HOWARD, LINDA  
Address: 250 LK LULU DR.  
City-St-Zip: WINTER HAVEN, FL 33880

Title: SDT ( ) Delete  
Name: BAGBY, AMY  
Address: 2780 REGISTER RD SE  
City-St-Zip: WINTER HAVEN, FL 33884

Title: V ( ) Delete  
Name: VOISARD, BRIAN  
Address: 2813 WINTERSET PARK  
City-St-Zip: WINTER HAVEN, FL 33884

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: AMY A. BAGBY

SECR

10/15/2007

Electronic Signature of Signing Officer or Director

Date