

# 2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N94000001532

**FILED**  
**Oct 29, 2008**  
**Secretary of State**

**Entity Name:** BOYNTON BEACH POLICE ATHLETIC LEAGUE, INC.

**Current Principal Place of Business:**

100 EAST BOYNTON BEACH BLVD.  
BOYNTON BEACH, FL 33435 US

**New Principal Place of Business:**

**Current Mailing Address:**

100 EAST BOYNTON BEACH BLVD.  
BOYNTON BEACH, FL 33435 US

**New Mailing Address:**

**FEI Number:** 65-0488479 **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:**

JONES, DEBORAH  
100 EAST BOYNTON BEACH BLVD.  
BOYNTON BEACH, FL 33435 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: BILL TOME

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: TOME, BILL  
Address: 100 E. BOYNTON BEACH BLVD.  
City-St-Zip: BOYNTON BEACH, FL 33435

Title: D ( ) Delete  
Name: EVANS, JOE  
Address: 100 E. BOYNTON BEACH BLVD.  
City-St-Zip: BOYNTON BEACH, FL 33435

Title: TS ( ) Delete  
Name: JONES, DEBORAH  
Address: 100 EAST BOYNTON BEACH BLVD.  
City-St-Zip: BOYNTON BEACH, FL 33435 US

**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: BILL TOME

Electronic Signature of Signing Officer or Director

P

10/29/2008

Date