

2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # N94000003220 1. Entity Name THE OWSLEY FOUNDATION, INC.						FILED 04 OCT 29 AM 10: 26 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Place of Business PALM HARBOR, FL 34683 US				Mailing Address PALM HARBOR, FL 34683 US			
2. Principal Place of Business <i>SAME AS ABOVE</i>				3. Mailing Address <i>SAME AS ABOVE</i>			
Suite, Apt. #, etc.				Suite, Apt. #, etc.			
City & State				City & State			
Zip		Country		Zip		Country	
4. FEI Number 59-3252540				Applied For ☐ Not Applicable			
5. Certificate of Status Desired				☒ \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent OWSLEY, R. G REV. 122 CARLYLE DRIVE PALM HARBOR, FL 34683				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code			
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 obligation of registered agent. SIGNATURE <i>Rev. R. G. Owsley, CEO</i> (NOTE: Registered Agent signature required when reinstating) DATE <i>10/20/04</i>							
FILE NOW!!! FEE IS \$61.25 After January 1, 2005, Fee will be \$122.50				In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE PSD				TITLE ☐ Change ☐ Addition			
NAME OWSLEY, R. G REV.				NAME ☐ Change ☐ Addition			
STREET ADDRESS 122 CARLYLE DRIVE				STREET ADDRESS ☐ Change ☐ Addition			
CITY-ST-ZIP PALM HARBOR, FL 34683				CITY-ST-ZIP ☐ Change ☐ Addition			
TITLE STD				TITLE ☐ Change ☐ Addition			
NAME OWSLEY, ESTHER A				NAME ☐ Change ☐ Addition			
STREET ADDRESS 122 CARLYLE DRIVE				STREET ADDRESS ☐ Change ☐ Addition			
CITY-ST-ZIP PALM HARBOR, FL 34683				CITY-ST-ZIP ☐ Change ☐ Addition			
TITLE D				TITLE ☐ Change ☐ Addition			
NAME MERRON, ESTHER G				NAME ☐ Change ☐ Addition			
STREET ADDRESS 122 CARLYLE DRIVE				STREET ADDRESS ☐ Change ☐ Addition			
CITY-ST-ZIP PALM HARBOR, FL 34683				CITY-ST-ZIP ☐ Change ☐ Addition			
TITLE VPD				TITLE ☐ Change ☐ Addition			
NAME HORNER, DAVID D JR				NAME ☐ Change ☐ Addition			
STREET ADDRESS 122 CARLYLE DRIVE				STREET ADDRESS ☐ Change ☐ Addition			
CITY-ST-ZIP PALM HARBOR, FL 34683				CITY-ST-ZIP ☐ Change ☐ Addition			
TITLE D				TITLE ☐ Change ☐ Addition			
NAME PARKER, BETH ANN				NAME ☐ Change ☐ Addition			
STREET ADDRESS 122 CARLYLE DRIVE				STREET ADDRESS ☐ Change ☐ Addition			
CITY-ST-ZIP PALM HARBOR, FL 34683				CITY-ST-ZIP ☐ Change ☐ Addition			
TITLE D				TITLE ☐ Change ☐ Addition			
NAME PARKER, BETH ANN				NAME ☐ Change ☐ Addition			
STREET ADDRESS 122 CARLYLE DRIVE				STREET ADDRESS ☐ Change ☐ Addition			
CITY-ST-ZIP PALM HARBOR, FL 34683				CITY-ST-ZIP ☐ Change ☐ Addition			
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: <i>Rev. R. G. Owsley, CEO</i> <i>Rev. R. G. Owsley, CEO</i>							
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR							