2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N94000006348

DENMARK, TONYA

1431 14TH STREET

CLERMONT, FL 34711

Name:

Address:

City-St-Zip:

Entity Name: MOONLIGHT DLAVEDS ING

FILED Nov 08, 2007 Secretary of State

Entity Name: MOONLIGHT PLAYERS, INC. **Current Principal Place of Business: New Principal Place of Business:** 732 W. MONTROSE ST. CLERMONT, FL 34711 **Current Mailing Address: New Mailing Address:** 732 W. MONTROSE ST. CLERMONT, FL 34711 FEI Number: 59-3293089 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: SHELDON, JANIS E 17521 SR 19 GROVELAND, FL 34736 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: JANIS E SHELDON Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete **PRES** () Change () Addition SHELDON, JANIS E Name: Name: 17521 SR 19 Address: Address: City-St-Zip: GROVELAND, FL 34736 City-St-Zip: Title: Title: () Delete () Change () Addition Name: BUSHWITZ, LAURA Name: Address: 4934 MOUNT PLEASANT ROAD Address: City-St-Zip: GROVELAND, FL 34736 City-St-Zip: Title: () Delete Title: () Change () Addition WHITE, DIANE Name: Name: 600 RIVER BIRCH COURT Address: Address: City-St-Zip: CLERMONT, FL 34711 City-St-Zip: Title: TREA () Delete Title: () Change () Addition Name: ROSEMARIE ALEXANDER, Name: Address: 972 FOREST HILL DR Address: City-St-Zip: CLERMONT, FL 34711 City-St-Zip: Title: SEC () Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: JANIS E. SHELDON PRES 11/08/2007