2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Oct 10, 2007
Secretary of State

DOCUMENT# N95000001730

Entity Name: HAMILTON COUNTY PUBLIC SCHOOLS FOUNDATION, INC.

Current Principal Place of Business:

4280 SW CR, 152
JASPER, FL 32052

New Principal Place of Business:

Current Mailing Address:

PO BOX 1059
JASPER, FL 32052

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**
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:

PARALEGAL AND ATTORNEY SERVICE BUREAU, INC
1406 HAYS STREET, STE. 2
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

HAMILTON COUNTY SCHOOL BOARD
4280 SW COUNTY RD 152
JASPER, FL 32052 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: SEAN ALDERMAN 10/10/2007
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: AP (X) Delete
Name: BULLARD, JOHNNY
Address: 4280 SW CR, 152
City-St-Zip: JASPER, FL 32052

Title: ST ( ) Delete
Name: BULLOCK, IMOGENE
Address: 5683 US HWY 129
City-St-Zip: JASPER, FL 32052

Title: D ( ) Delete
Name: ADAMS, MARY
Address: 16693 SPRING ST
City-St-Zip: WHITE SPRINGS, FL 32096

Title: D ( ) Delete
Name: JOHNSON, ISAAC
Address: RT 1 BOX 161
City-St-Zip: JASPER, FL 32052

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:

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: SEAN ALDERMAN DIR 10/10/2007
Electronic Signature of Signing Officer or Director Date