

2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N95000002599

FILED
Jun 02, 2007
Secretary of State

Entity Name: JOHN REYNOLDS & ELEANOR B. ALLEN CHARITABLE FOUNDATION, INC.

Current Principal Place of Business:

100 S. ASHLEY DRIVE
SUITE 1500
TAMPA, FL 33602

New Principal Place of Business:

2929 W. VILLA ROSA PARK
TAMPA, FL 33611

Current Mailing Address:

100 S. ASHLEY DRIVE
SUITE 1500
TAMPA, FL 33602

New Mailing Address:

2929 W. VILLA ROSA PARK
TAMPA, FL 33611

FEI Number: 59-3317122

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, ROBERT S.
100 E. MADISON STREET
SUITE 300
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

ALLEN, WILLIAM R
2929 W. VILLA ROSA PARK
TAMPA, FL 33611 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: WILLIAM R. ALLEN

06/02/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ALLEN, REYNOLDS W
Address: 324 HYDE PARK, SUITE 300
City-St-Zip: TAMPA, FL 33602

Title: VTD () Delete
Name: WILLIAMS, ROBERT S
Address: 100 E. MADISON STREET, SUITE 300
City-St-Zip: TAMPA, FL 33602

Title: SD () Delete
Name: ROBIN, TRACY J
Address: 100 E. MADISON STREET, SUITE 300
City-St-Zip: TAMPA, FL 33602

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ALLEN, REYNOLDS W
Address: 2929 W. VILLA ROSA PARK
City-St-Zip: TAMPA, FL 33611

Title: D (X) Change () Addition
Name: ALLEN, JOHN R
Address: 2929 W. VILLA ROSA PARK
City-St-Zip: TAMPA, FL 33611

Title: D (X) Change () Addition
Name: MCINTIRE, JESSICA
Address: 2929 W. VILLA ROSA PARK
City-St-Zip: TAMPA, FL 33611

Title: D () Change (X) Addition
Name: BOLWINSKI, MERIDITH B
Address: P.O. BOX 1865
City-St-Zip: WAUCHULA, FL 33873

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: WILLIAM R. ALLEN

PD

06/02/2007

Electronic Signature of Signing Officer or Director

Date