2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # N95000004328 FILED PONTE VEDRA PUBLIC EDUCATION FOUNDATION, INC. 05 SEP 27 AM 10: 26 SLUMLIAKY OF STATE ALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 100 PGA TOUR BLVD 100 PGA TOUR BLVD PONTE VEDRA BEACH, FL 32082 PONTE VEDRA BEACH, FL 32082 US 2. Principal Place of Business 3. Mailing Address Suite, Apt, #, etc. Suite, Apt. #, etc. 09202005 REIN-NP CR2E099 (6/04) City & State City & State 4. FEI Number 59-3333907 Applied For Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name RAX CO Street Address (P.O. Box Number is Not Acceptable) 50 NO. LAURA STREET, SUITE 3300 3400 BARNETT CENTER JACKSONVILLE, FL 32202 City Zip Code 8. aThe above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. 1 am familiar with, and accept the obligations of registered agent. SIGNATURE Barbara C. Johnston, VP 9/26/05 (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$61.25 Make check payable to In accordance with s. 607.193(2)(b), F.S., the After January 1, 2006, Fee will be \$122.50 Florida Department of State corporation did not receive the prior notice. 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11 ST Delete DILE TITLE 5T Addition LIGHTCAP, JEANNE KING, ANDREA E. NAME NAME 100 PGA TOUR BLUD PONTE VEDRA BEACH, FL STREET ADDRESS 100 PGA TOUR BLVD STREET ADDRESS CITY-ST-ZIP PONTE VEDRA BEACH, FL CITY-ST-7IP TITLE D ☐ Delete TITLE QQQOSOOSS1EDChange ☐ Addition BERRY, CLARE NAME NAME 09/29/05--01071--011 **B1.25 STREET ADDRESS 113 LINKSIDE CIR. STREET ADDRESS CITY - ST - 7LP PONTE VEDRA BEACH, FL CITY-ST-ZIP Delete TITLE TITLE ☐ Change ☐ Addition BOWERS, RICHARD NAME NAME STREET ADDRESS 100 PGA TOUR STREET ADDRESS pol al 28 PONTE VEDRA BEACH, FL CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Addition TITLE COULSON, MIKE NAME NAME 737 E. PALMERA DRIVE STREET ADDRESS STREET ADDRESS City-St-7IP PONTE VEDRA BEACH, FL 32082 CITY-ST-ZIP TITLE □ Defete TITLE ☐ Change ☐ Addition HOENER, MARILYN NAME NAME STREET ADDRESS 71 VILLAGE WALK LANE STREET ADDRESS CITY-ST-ZIP PONTE VEDRA BEACH, FL 32082 CITY-ST-7IP TITLE Delete TITLE Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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.

NATURE AND TYPED OR PRINTED NAME OF SIGNING PICE FICER OR DIRECTOR

9/21/05 904 285-3700 Date Desystem Phone #