2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # N95000005114 1. Entity Name



FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

STATEW	IDE AMATEUR HOCKEY O	05 OCT -4 PM 3: 43					
Principal Place of Business 9466 WICKHAM WAY ORLANDO, FL 32836		Mailing Address 9466 WICKHAM WAY ORLANDO, FL 32836		REMST	atemen	0	5
2. Principal F	Place of Business WW 59 PLACE	3. Mailing Address	J9 PLACE				
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	-	09292005 REI	N-NP CR2	E099 (6/04)	
PAULIANO, K		PAUK LAWS. K		4. FEI Number 59-341736	5	No	oplied For ot Applicable
3306	7 BROWARD	33067	Bloward	5. Certificate of Sta	atus Desired	\$8.75 Add Fee Require	
	6. Name and Address of Current	Registered Agent	Name a		ress of New Registers	d Agent	
	, ROBERT	C FLIEDY					
	KHAM WAY), FL 32836	Street Address (P.O. Box Number is Not Acceptable)					
			8634	NW 59	PLACE		
			City PALK	1 4M	F	L 333	867
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 obligations of registered agent.							
ino oonga		///			9/1	1.	
SIGNATURE	Signature, typed or printed name of registered agent	Mu.	: Registered Agent signature regi	uland where an extentions	1/26/	<u> </u>	<u>. </u>
	Signature, typeocor pranteo mana or responsed again.	and the mapping to the second	: Mathematic Aftern suffrance and				
	ILE NOW!!! FEE IS \$61.25 nuary 1, 2006, Fee will be \$122.5	o), F.S., the or notice.		ack payable to partment of Si	. 1		
10.	OFFICERS AND DIE		11.	ADDITIONS/CHANGE	ES TO OFFICERS AND		
TITLE NAME	SCARPACI, FRANK	☐ Delete	TITLE NAME	900	0060214 050105300	□ Change 4569	Addition
STREET ADDRESS CITY+ST-ZIP	2353 LITTLE COUNTY RD. PARRISH, FL 34219		STREET ADDRESS City-St-zip	10/04/0)5010530(08 **61.	25
TITLE	S S	Delete	TITLE			☐ Change	Addition
NAME	PAGE, GAIL	JES DOIGIU	NAME				
STREET ADDRESS CITY-ST-ZIP	775 116TH AVENUE TREASURE ISLAND, FL 33706		STREET ADORESS CITY-ST-ZIP				
TITLE	P	Delete	TITLE			☐ Change	☐ Addition
NAME	SIMONINI, ROBERT	/ -	NAME				-
STREET ADDRESS CITY-ST-ZIP	9466 WICKHAM WAY ORLANDO, FL 32836		STREET ADDRESS CITY-ST-ZIP				
TITLE	VPD	☐ Delete	TITLE	· · · · · · · · · · · · · · · · · · ·		☐ Change	☐ Addition
NAME STREET ADDRESS	GOLDSTEIN, ROBERT 2650 N MILITARY TRAIL #250		NAME STREET ADDRESS				
CITY-ST-ZIP	BOCA RATON, FL 33431		CITY-ST-ZIP				
TITLE	D	☐ Delete	TITLE		<u> </u>	Change	☐ Addition
NAME STREET ADDRESS	RICHARD, GREG 364 PARK FOREST WAY		NAME Street address				
CITY-ST-ZIP	WEST PALM BEACH, FL 33414		City-St-ZIP				
TITLE	T, D	☐ Defete	TITLE			☐ Change	☐ Addition
NAME STREET ADDRESS	FRIEDMAN, MARC 8634 NW 59TH AVE		NAME STREET ADDRESS				
CITY-ST-ZIP	PARKLAND, FL 33067		CITY-ST-ZIP				
indicated	certify that the information supplied with don this report or supplemental report is	true and accurate and that r	ny cianatura chali hava th	e come legal affect or i	if made under eath: the	t I am an officer	r or director
of the co	rporation or the receiver or trustee emp d, or on an attachment with an address,	owered to execute this report with <u>all other like</u> empoyered	als required by Chapter 6	i17, Florida Statutes; an	nd that my name appea	rs in Block 10 o	r Block 11 if
SIGNA	TUBE: The	- 1/1h	'	9/26	65 98	4-752-30	FF1
JUSTA	VIII	PRINTED NAME OF BIGNING OFFICER			Data	Daytime Phone #	