2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N96000005310

Entity Name: BUCK LAKE ALLIANCE, INC.

FILED Oct 17, 2006 Secretary of State

6527 CHEVY WAY

TALLAHASSEE, FL 32317 US

Current Mailing Address: New Mailing Address:

PO BOX 15996 6527 CHEVY WAY

TALLAHASSEE, FL 32317 TALLAHASSEE, FL 32317

FEI Number: 59-3411946 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DEW, JOHN D 6527 CHEVY WAY

TALLAHASSEE, FL 32317 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: JOHN D DEW

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: () Change () Addition

 Name:
 DEW, JOHN D
 Name:

 Address:
 6527 CHEVY WAY
 Address:

 City-St-Zip:
 TALLAHASSEE, FL 32317 US
 City-St-Zip:

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 FREDICKSON, STEVE
 Name:
 CORBIN, JOHN

 Address:
 1280 RED FIELD ROAD
 Address:
 2222 ARENDELL WAY

 City-St-Zip:
 TALLAHASSEE, FL 32317
 City-St-Zip:
 TALLAHASSEE, FL 32308

Title: S () Delete Title: () Change () Addition

 Name:
 KULAKOWSKI, ZOE
 Name:

 Address:
 1320 W BLOCKFORD COURT
 Address:

 City-St-Zip:
 TALLAHASSEE, FL 32317
 City-St-Zip:

Title: T () Delete Title: T (X) Change () Addition

Name:BARKER, ROSANNEName:FREDRICKSON, STEVEAddress:TUNG HILL ROADAddress:1280 REDFIELD ROADCity-St-Zip:TALLAHASSEE, FL 32317City-St-Zip:TALLAHASSEE, FL 32317

I hereby certify that the information supplied with this filing does not qualify for the 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: JOHN D DEW P 10/17/2006