

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N97000004178

FILED
Jul 02, 2006
Secretary of State

Entity Name: THE LIBERTARIAN PARTY OF MARION COUNTY, INC.

Current Principal Place of Business:

1941 SOUTHEAST 51ST TERRACE
OCALA, FL 34471 US

New Principal Place of Business:

1920 SOUTHWEST 31ST AVENUE
APARTMENT 5
OCALA, FL 34474 US

Current Mailing Address:

1941 SOUTHEAST 51ST TERRACE
OCALA, FL 34471 US

New Mailing Address:

1920 SOUTHWEST 31ST AVENUE
APARTMENT 5
OCALA, FL 34474 US

FEI Number: 59-3447230 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **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:

CALVO, WILLIAM A III
1941 SOUTHEAST 51ST TERRACE
OCALA, FL 34471 US

Name and Address of New Registered Agent:

TILLERY, JEFFREY M
1920 SOUTHWEST 31ST AVENUE
APARTMENT 5
OCALA, FL 34474 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: JEFFREY MARK TILLERY

07/02/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VCD () Delete
Name: MILLS, NANCY
Address: 9155 SW 30TH CT
City-St-Zip: OCALA, FL 34476

Title: CTD () Delete
Name: TILLERY, MARC
Address: 3092 SW HARBOR HILLS RD.
City-St-Zip: DUNNELLON, FL 34431

Title: DS () Delete
Name: CALVO, WILLIAM A III
Address: 1941 SOUTH EAST 51ST TERRACE
City-St-Zip: OCALA, FL 34471

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: CTSD (X) Change () Addition
Name: TILLERY, JEFFREY M
Address: 1920 SOUTHWEST 31ST AVENUE, APARTMENT 5
City-St-Zip: OCALA, FL 34474

Title: D (X) Change () Addition
Name: CALVO, WILLIAM A III
Address: 1941 SOUTH EAST 51ST TERRACE
City-St-Zip: OCALA, FL 34471

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: JEFFREY MARK TILLERY

CTSD

07/02/2006

Electronic Signature of Signing Officer or Director

Date