2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N97000006542

Entity Name: STRAWBRIDGE ART LEAGUE, INC.

FILED Mar 28, 2007 Secretary of State

625 E. NEW HAVEN AVE. MELBOURNE, FL 32901

Current Mailing Address: New Mailing Address:

PO BOX 2616 625 E. NEW HAVEN AVE. MELBOURNE, FL 329022616 MELBOURNE, FL 32901

FEI Number: 59-3507199 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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: Name and Address of New Registered Agent:

FREEMAN, BARBARA
3799 S BANANA RIVER BLVD
41009

SPECTOR, MAX
3082 BLACKBIRD CT.
MELBOURNE, FL 32935 US

#1009 MELBOURI COCOA BEACH, FL 32931 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: MAX SPECTOR 03/28/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 MCCOY, BILL
 Name:
 BARANOWSKI, ED

Address: 320 SPOONBILL LANE Address: 555 OLD OAK STREET
City-St-Zip: MELBOURNE BEACH, FL 32951 City-St-Zip: MELBOURNE, FL 32935

Address: 685 SANDERLING DRIVE Address: 552 S. MAGNOLIA AVE.
City-St-Zip: INDIALANTIC, FL 32903 City-St-Zip: MELBOURNE, FL 32935

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

Name: RAYMOND, VIRGINIA Name: BELCHER, LOÚ

Address: 1444 BAYSHORE DRIVE Address: 725 PORT MALABAR BLVD. NE APT 302

City-St-Zip: COCOA BEACH, FL 32931 City-St-Zip: PALM BAY, FL 32905

 Name:
 FREEMAN, BARBARA
 Name:
 SPECTOR, MAX

 Address:
 3799 S BANANA RIVER DR #1009
 Address:
 3082 BLACKBIRD CT.

 City-St-Zip:
 COCOA BEACH, FL 32931
 City-St-Zip:
 MELBOURNE, FL 32935

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

 Name:
 KESSLER, SÜSAN
 Name:

 Address:
 460 HALL ROAD
 Address:

 City-St-Zip:
 MALABAR, FL 32950
 City-St-Zip:

Title: M () Delete Title: () Change () Addition

 Name:
 HANSON, GWEN
 Name:

 Address:
 114 FOURTEENTH AVE
 Address:

 City-St-Zip:
 INDIALANTIC, FL 32903
 City-St-Zip:

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: MAX SPECTOR T 03/28/2007