

**2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

**FILED  
Oct 27, 2008  
Secretary of State**

DOCUMENT# N98000005351

Entity Name: ISLAMORADA FIREFIGHTERS' BENEVOLENT ASSOCIATION, INC.

**Current Principal Place of Business:**

81850 OVERSEAS HIGHWAY  
ISLAMORADA, FL 33036

**New Principal Place of Business:**

**Current Mailing Address:**

81850 OVERSEAS HIGHWAY  
ISLAMORADA, FL 33036

**New Mailing Address:**

FEI Number: 65-0926776      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

TOTH, GEO  
126 SO. BAY HARBOR DR  
KEY LARGO, FL 33037      US

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

TOTH, GEO  
256 HIBISCUS ST.  
TAVERNIER, FL 33070      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: GEO TOTH      10/27/2008  
Electronic Signature of Registered Agent      Date

**OFFICERS AND DIRECTORS:**

Title: P      ( ) Delete  
Name: TOTH, GEO  
Address: 126 S BAY HARBOR DR  
City-St-Zip: KEY LARGO, FL 33037

Title: V      ( ) Delete  
Name: ROBERTS, DAVE  
Address: 111 PUEBLO ST  
City-St-Zip: TAVERNIER, FL 33070

Title: T      ( ) Delete  
Name: MASON, WALTER  
Address: 120 SOUTH HAMMOCK RD  
City-St-Zip: ISLAMORADA, FL 33036

Title: S      ( ) Delete  
Name: BURKEL, KYLE  
Address: 246 CUBA RD  
City-St-Zip: TAVERNIER, FL 33070

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P      (X) Change ( ) Addition  
Name: TOTH, GEO  
Address: 256 HIBISCUS  
City-St-Zip: TAVERNIER, FL 33070

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: GEO TOTH      P      10/27/2008  
Electronic Signature of Signing Officer or Director      Date