

# 2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N98000006884

**FILED**  
**Mar 01, 2006**  
**Secretary of State**

**Entity Name:** THE RUFUS FISHER SEEING EYE DOG FOUNDATION, INC.

**Current Principal Place of Business:**

173 ROOT TRAIL  
PALM BEACH, FL 33480

**New Principal Place of Business:**

340 ROYAL POINCIANA WAY  
SUITE 317 PMB 375  
PALM BEACH, FL 33480

**Current Mailing Address:**

173 ROOT TRAIL  
PALM BEACH, FL 33480

**New Mailing Address:**

340 ROYAL POINCIANA WAY  
SUITE 317 PMB 375  
PALM BEACH, FL 33480

**FEI Number:** 52-2142151      **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:**

FISHER, TAMARA J  
173 ROOT TRAIL  
PALM BEACH, FL 33480      US

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

FISHER, TAMARA J  
340 ROYAL POINCIANA WAY  
SUITE 317 PMB 375  
PALM BEACH, FL 33480      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: TJ FISHER

03/01/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D      ( ) Delete  
Name: FISHER, TAMARA J  
Address: 173 ROOT TRAIL  
City-St-Zip: PALM BEACH, FL 33480

Title: D      ( ) Delete  
Name: FISHER, STUART C  
Address: 3324 WEST UNIVERSITY # 136  
City-St-Zip: GAINESVILLE, FL 32607

Title: D      (X) Delete  
Name: QUINN, J  
Address: 173 ROOT TRAIL  
City-St-Zip: PALM BEACH, FL 33480

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

Title: D      (X) Change ( ) Addition  
Name: FISHER, TAMARA J  
Address: 340 ROYAL POINCIANA WAY SUITE 317  
City-St-Zip: PALM BEACH, FL 33480

Title: D      (X) Change ( ) Addition  
Name: FISHER, STUART C  
Address: 340 ROYAL POINCIANA WAY SUITE 317  
City-St-Zip: PALM BEACH, FL 33480

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
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: TAMARA JEANNE FISHER

MGR

03/01/2006

Electronic Signature of Signing Officer or Director

Date