

**2008 FOR PROFIT CORPORATION
REINSTATEMENT**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

08 DEC 22 AM 8:19

DOCUMENT # P03000047781

1. Entity Name
PREMIER CHEERLEADING OF NW FLORIDA, INC.



Principal Place of Business
2903 W. 15TH STREET
PANAMA CITY, FL 32401

Mailing Address
2847 JOHN DEERE DR
SUITE 102
KNOXVILLE, TN 37917

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Zip

Country

11242008 REIN-P CR2E098 (1/07)

6. Name and Address of Current Registered Agent

DEL TORO, ROBERT
2005 SUTHERLAND RD
LYNN HAVEN, FL 32444

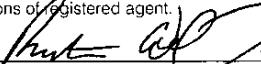
Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE  Robert Del Toro

12-18-08

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$750.00
After January 1, 2009, Fee will be \$900.00

10. OFFICERS AND DIRECTORS

TITLE PRES
NAME DEL TORO, ROBERT
STREET ADDRESS 2903 W. 15TH ST
CITY-ST-ZIP PANAMA CITY, FL 32401

Delete

TITLE CFO
NAME DEL TORO, SARAH R
STREET ADDRESS 2903 W. 15TH ST
CITY-ST-ZIP PANAMA CITY, FL 32401

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

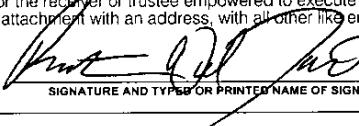
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition
100139204251
12/22/08--01052--023 ***750.00

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  Robert Del Toro

12-18-08

845-692-9244

Date

Daytime Phone #

10/23