

**2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

**FILED  
Oct 19, 2009  
Secretary of State**

DOCUMENT# N01000005749

**Entity Name:** EAGLE BOXING, DONE DEAL CHARITABLE ORGANIZATION INTERNATIONAL, INC.

**Current Principal Place of Business:**

13180 S.W. 103RD STREET  
DUNNELLON, FL 34432

**New Principal Place of Business:**

**Current Mailing Address:**

13180 S.W. 103RD STREET  
DUNNELLON, FL 34432

**New Mailing Address:**

**FEI Number:** 59-3750292      **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:**

CHASE, ANTHONY J SR.  
13180 S.W. 103RD STREET  
DUNNELLON, FL 34432    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: ANTHONY J. CHASE

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

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

Title:        PSTD        ( ) Delete  
Name:        CHASE, ANTHONY J SR.  
Address:     13180 S.W. 103RD STREET  
City-St-Zip: DUNNELLON, FL 34432

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

Title:        D            ( ) Delete  
Name:        CLARK, TROY H  
Address:     POST OFFICE BOX 12851  
City-St-Zip: GAINESVILLE, FL 32604

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

Title:        D            ( ) Delete  
Name:        WILSON, MICHAEL E PH.D.  
Address:     POST OFFICE BOX 561  
City-St-Zip: BELLEVIEW, FL 34421

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: ANTHONY J. CHASE

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

PRES

10/19/2009

\_\_\_\_\_  
Date