2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 372432

Address:

City-St-Zip:

124 BORDEAUX LN

SAVANNAH, GA 31419

Entity Name: CENTER BROS., INC. OF FLORIDA

FILED Oct 19, 2004 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	ERSITY BLVD V /ILLE, FL 3221				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
4020 UNIVERSITY BLVD W JACKSONVILLE, FL 32217			P.O. BOX 22278 SAVANNAH, GA 3140	P.O. BOX 22278 SAVANNAH, GA 31403	
FEI Number:	58-1048227	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
100 CARRI. PONTE VE	ENRY W, JR AGE LAMP WA DRA BEACH, F	L 32082 US	urnaca of changing its registers	Loffice or registered agent or both	
in the State	named entity su of Florida.	bmits this statement for the pu	irpose of changing its registered	I office or registered agent, or both,	
SIGNATUR	E:				
	Electronic	Signature of Registered Ager	nt	Date	
	,	2)(b), F.S., the corporation did not rust Fund Contribution ().	receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DC () D CENTER, LEO E #3 WINDLESS C SAVANNAH, GA	г	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P () D MAY, CHARLES S 640 DONALD RO- SAINT AUGUSTIN	SS WAY	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () D TUTEN, HENRY V 100 CARRIAGE L PONTE VEDRA B	V. JR., AMP WAY	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	S ()D		Title:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: MICHAEL T. DIONNE S 10/19/2004