

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000025768

FILED
May 16, 2005
Secretary of State

Entity Name: BOBCO WHOLESale INC

Current Principal Place of Business:

106 TURKEY CREEK
ALACHUA, FL 32615 US

New Principal Place of Business:

11050 NW 60 DR
ALACHUA, FL 32615 US

Current Mailing Address:

106 TURKEY CREEK
ALACHUA, FL 32615 US

New Mailing Address:

11050 NW 60 DR
ALACHUA, FL 32615 US

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COGSWELL, ROBERT W
106 TURKEY CREEK
ALACHUA, FL 32615 US

Name and Address of New Registered Agent:

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: ROBERT COGSWELL

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: COGSWELL, ROBERT W
Address: 106 TURKEY CREEK
City-St-Zip: ALACHUA, FL 32615 US

Title: VP () Delete
Name: HARRIS, CLARITA
Address: 106 TURKEY CREEK
City-St-Zip: ALACHUA, FL 32615 US

Title: S () Delete
Name: COGSWELL, ANNA
Address: 10335 N CITRUS SPRINGS BLVD
City-St-Zip: CITRUS SPRINGS, FL 34434 US

Title: T () Delete
Name: MASTAPASCO, JUDY
Address: 11612 SW 177 CT
City-St-Zip: DUNNELLON, FL 34432 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: COGSWELL, ROBERT W
Address: 11050 NW 60 DR
City-St-Zip: ALACHUA, FL 32615 US

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 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.

SIGNATURE: ROBERT W COGSWELL

Electronic Signature of Signing Officer or Director

PRES

05/16/2005

Date