

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000158439

FILED
Nov 11, 2004
Secretary of State

Entity Name: R.A. FLORIDA DEVELOPMENT I, INC.

Current Principal Place of Business:

10800 SIKES PLACE, SUITE 160
CHARLOTTE, NC 28277

New Principal Place of Business:

110 MATTHEWS STATION
SUITE 2D
MATTHEWS, NC 28105

Current Mailing Address:

10800 SIKES PLACE, SUITE 160
CHARLOTTE, NC 28277

New Mailing Address:

110 MATTHEWS STATION
SUITE 2D
MATTHEWS, NC 28105

FEI Number: 20-0546077

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND
PLANTATION, FL 33324 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: _____

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: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES () Change (X) Addition
Name: ALLAN, RANDOLPH M
Address: 110 MATTHEWS STATION, SUITE 2D
City-St-Zip: MATTHEWS, NC 28105

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: RANDOLPH M. ALLEN

PRES

11/11/2004

Electronic Signature of Signing Officer or Director

_____ Date