

**2005 FOR PROFIT CORPORATION REINSTATEMENT**

**FILED  
Oct 09, 2005  
Secretary of State**

DOCUMENT# P04000126805

Entity Name: PUBLIC ACQUISITION COMPANY

**Current Principal Place of Business:**

9401 OAK STREET  
TAMPA, FL 33569

**New Principal Place of Business:**

**Current Mailing Address:**

9401 OAK STREET  
TAMPA, FL 33569

**New Mailing Address:**

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

**Name and Address of Current Registered Agent:**

HEFNER, DANIEL L  
1502 NORTH TAYLOR ROAD  
BRANDON, FL 33510 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: KEN MCCLEAVE

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: MCCLEAVE, KENNETH  
Address: 9401 OAK STREET  
City-St-Zip: RIVERVIEW, FL 33569

Title: D ( ) Delete  
Name: MCCLEAVE, MARILYN A  
Address: 9401 OAK STREET  
City-St-Zip: RIVERVIEW, FL 33569

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

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: KENMCCLEAVE

Electronic Signature of Signing Officer or Director

P

10/09/2005

Date