

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000081419

**FILED**  
**Oct 27, 2008**  
**Secretary of State**

**Entity Name:** RTWW BUSINESS SERVICES INC.

**Current Principal Place of Business:**

200 EAST PALM VALLEY DR.  
2ND FLR.  
OVIEDO, FL 32765

**New Principal Place of Business:**

**Current Mailing Address:**

200 EAST PALM VALLEY DR.  
2ND FLR.  
OVIEDO, FL 32765

**New Mailing Address:**

**FEI Number:** 20-3010278      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DRIVE  
SUITE 4  
WESTON, FL 33331 US

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

MARTIN, MARIA T FINANCE  
200 E. PALM VALLEY DR.  
SUITE 2000  
OVIEDO, FL 32765 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: MARIA T MARTIN

10/27/2008

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:

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

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

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

Title: CEO ( ) Change (X) Addition  
Name: WILDE, FRANCIS E CHAIRMA  
Address: 200 E. PALM VALLEY DR. SUITE 2000  
City-St-Zip: OVIEDO, FL 32765

Title: SEC ( ) Change (X) Addition  
Name: EUGENE, VITETTA J SECRETA  
Address: 200 E. PALM VALLEY DR. SUITE 2000  
City-St-Zip: OVIEDO, FL 32765

Title: EVP ( ) Change (X) Addition  
Name: WHEELER, THOMAS EVP  
Address: 200 E. PALM VALLEY DR. SUITE 2000  
City-St-Zip: OVIEDO, FL 32765

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARIA T. MARTIN

FIN

10/27/2008

Electronic Signature of Signing Officer or Director

Date