

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000130094

FILED
Sep 30, 2006
Secretary of State

Entity Name: CALCULATED TECHNOLOGIES, INC

Current Principal Place of Business:

3040 FOXHILL CIRCLE
104
APOPKA, FL 32703

New Principal Place of Business:

405 DOUGLAS AVE
ALTAMONTE SPRINGS, FL 32714

Current Mailing Address:

3040 FOXHILL CIRCLE
104
APOPKA, FL 32703

New Mailing Address:

405 DOUGLAS AVE.
ALTAMONTE SPRINGS, FL 32714

FEI Number: 20-3504223

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GLOVER, FREDRICK D
3040 FOXHILL CIRCLE
104
APOPKA, FL 32703 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: FREDERICK D. GLOVER

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: CEOP () Delete
Name: GLOVER, FREDERICK D
Address: 919 W. SR. 435 #300
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: TVP () Delete
Name: GLOVER, MARY D
Address: 919 W. SR 435 #300
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: VP () Delete
Name: ELLIOTT, JOSCELYN
Address: 3040 FOXHILL CIRCLE #104
City-St-Zip: APOPKA, FL 32703

Title: VP (X) Delete
Name: BETHAY, BERNITA
Address: 3040 FOXHILL CIRCLE #104
City-St-Zip: APOPKA, FL 32703

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEOP (X) Change () Addition
Name: GLOVER, FREDERICK D
Address: 405 DOUGLAS AVE.
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: TVP (X) Change () Addition
Name: LICKLITER, MARK
Address: 405 DOUGLAS
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: VPD (X) Change () Addition
Name: YVES, BOUELE
Address: 405 DOUGLAS AVE
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

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 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: FREDERICK D. GLOVER

CEO

09/30/2006

Electronic Signature of Signing Officer or Director

Date