

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000102564

FILED
Jan 04, 2008
Secretary of State

Entity Name: REAL ESTATE ACQUISITIONS OF PINELLAS, INC.

Current Principal Place of Business:

11912 81ST AVE N
SEMINOLE, FL 33772 US

New Principal Place of Business:

Current Mailing Address:

11912 81ST AVE N
SEMINOLE, FL 33772 US

New Mailing Address:

14845 SEMINOLE TRAIL
SEMINOLE, FL 33776 US

FEI Number: 14-6059864

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIEGLE, DAREN S
11912 81ST AVE N
SEMINOLE, FL 33772 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: SHARON J PROPST

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/D () Delete
Name: SIEGLE, DAREN S
Address: 11912 81ST AVE N
City-St-Zip: SEMINOLE, FL 33772 US

Title: VP/D () Delete
Name: PETTIT, RANDALL S
Address: 3124 32ND AVE N
City-St-Zip: ST PETERSBURG, FL 33713 US

Title: CFOD () Delete
Name: PROPST, SHARON J
Address: 14845 SEMINOLE TRAIL
City-St-Zip: SEMINOLE, FL 33776 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: SHARON J PROPST

Electronic Signature of Signing Officer or Director

CFOD

01/04/2008

Date