

**2009 FOR PROFIT CORPORATION REINSTATEMENT**

**FILED  
Jan 19, 2009  
Secretary of State**

DOCUMENT# P07000017657

Entity Name: LAURA KLINE FRESEMAN P.A.

**Current Principal Place of Business:**

511 BAYSHORE DR, UNIT 1009  
FT. LAUDERDALE, FL 33304

**New Principal Place of Business:**

103 COUNTRY CLUB WAY  
ROYAL PALM BEACH, FL 33411

**Current Mailing Address:**

511 BAYSHORE DR, UNIT 1009  
FT. LAUDERDALE, FL 33304

**New Mailing Address:**

103 COUNTRY CLUB WAY  
ROYAL PALM BEACH, FL 33411

FEI Number: 20-8425859      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

FRESEMAN, LAURA K  
103 COUNTRY CLUB WAY  
ROYAL PALM BEACH, FL 33411      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: LAURA K FRESEMAN

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: PSTD      ( ) Delete  
Name: FRESEMAN, LAURA K  
Address: 103 COUNTRY CLUB WAY  
City-St-Zip: ROYAL PALM BEACH, FL 33411

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

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

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP      ( ) Change (X) Addition  
Name: FRESEMAN, LAURA E  
Address: 103 COUNTRY CLUB WAY  
City-St-Zip: ROYAL BEACH, FL 33411

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: MARK E FRESEMAN

VP

01/19/2009

Electronic Signature of Signing Officer or Director

Date