

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P97000059831

FILED
Apr 25, 2007
Secretary of State

Entity Name: GERMSTOPPER MANAGEMENT CORPORATION

Current Principal Place of Business:

26 SEA MARSH ROAD
AMELIA ISLAND, FL 32034 US

New Principal Place of Business:

1301 RIVERPLACE BLVD.
SUITE 2014
JACKSONVILLE, FL 32207 US

Current Mailing Address:

P.O. BOX 8354
FERNANDINA BEACH, FL 32035 US

New Mailing Address:

1301 RIVERPLACE BLVD.
SUITE 2014
JACKSONVILLE, FL 32207 US

FEI Number: 59-3455971

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TODD, WILLIAM M
26 SEA MARSH ROAD
AMELIA ISLAND, FL 32034 US

Name and Address of New Registered Agent:

TODD, WILLIAM M
1301 RIVERPLACE BLVD.
SUITE 2014
JACKSONVILLE, FL 32207 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: WILLIAM M. TODD

04/25/2007

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: D () Delete
Name: TODD, SARAH C
Address: 266A CARL STREET
City-St-Zip: SAN FRANCISCO, CA 94117

Title: D () Delete
Name: TODD, VIRGINIA M
Address: 266A CARL STREET
City-St-Zip: SAN FRANCISCO, CA 94117

Title: D () Delete
Name: TODD, WILLIAM M
Address: 26 SEA MARSH ROAD
City-St-Zip: AMELIA ISLAND, FL 32034

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: TODD, WILLIAM M
Address: 1301 RIVERPLACE BLVD., SUITE 2014
City-St-Zip: JACKSONVILLE, FL 32207

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: WILLIAM M. TODD

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04/25/2007

Electronic Signature of Signing Officer or Director

Date