

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P99000108530

Entity Name: KENT AND CORMICAN, P.A.

FILED
Nov 30, 2009
Secretary of State

Current Principal Place of Business:

110 SOUTHEAST 6TH STREET
SUITE 1970
FORT LAUDERDALE, FL 33301

New Principal Place of Business:

Current Mailing Address:

110 SOUTHEAST 6TH STREET
SUITE 1970
FORT LAUDERDALE, FL 33301

New Mailing Address:

FEI Number: 65-0980395

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KENT, NORMAN
110 SOUTHEAST 6TH STREET
SUITE 1970
FORT LAUDERDALE, FL 33301 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: NORM KENT

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: PTD () Delete
Name: KENT, NORM
Address: 110 SOUTHEAST 6TH STREET, SUITE 1970
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: VSD () Delete
Name: CORMICAN, RUSSELL
Address: 110 SOUTHEAST 6TH STREET, SUITE 1970
City-St-Zip: FORT LAUDERDALE, FL 33301

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

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

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

Title: A () Change (X) Addition
Name: B, C
Address: 215 NORTHEAST 17 AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: A () Change (X) Addition
Name: B, C
Address: 215 NORTHEAST 17 AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: A () Change (X) Addition
Name: B, C
Address: 215 NORTHEAST 17 AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: A () Change (X) Addition
Name: B, C
Address: 215 NORTHEAST 17 AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33301

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: NORM KENT

Electronic Signature of Signing Officer or Director

PTD

11/30/2009

Date