

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 277118

FILED
Oct 25, 2004
Secretary of State

Entity Name: RIGGS INCORPORATED

Current Principal Place of Business:

600 DATURA STREET
WEST PALM BEACH, FL 33401 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2440
WEST PALM BEACH, FL 33402 US

New Mailing Address:

FEI Number: 59-1030366

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RIGGS, THOMAS P., III
600 DATURA ST
WEST PALM BCH, FL 33402 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: _____

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: VP () Delete
Name: RIGGS, ELIZABETH R.,
Address: 600 DATURA ST
City-St-Zip: WEST PALM BCH, FL

Title: D () Delete
Name: RIGGS, PAULA L,
Address: 600 DATURA ST
City-St-Zip: WEST PALM BCH, FL

Title: PD () Delete
Name: RIGGS, III THOMAS P,
Address: 600 DATURA ST
City-St-Zip: WEST PALM BCH, FL

Title: STD () Delete
Name: RIGGS, MARGARET H,
Address: 600 DATURA ST
City-St-Zip: WEST PALM BCH, FL

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:

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 Section 119.07(3)(i), 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: T.P.RIGGS, III

PD

10/25/2004

Electronic Signature of Signing Officer or Director

_____ Date