

# 2011 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 443837

FILED  
Jan 07, 2011  
Secretary of State

Entity Name: AMERICAN HERITAGE INSTITUTIONAL SERVICES, INC.  
C/O THOMPSON, B  
FORREST

**Current Principal Place of Business:**

5027 S US HWY 17-92  
CASSELBERRY, FL 32707

**New Principal Place of Business:**

23 ALAFAYA WOODS BLVD  
#150  
OVIEDO, FL 32765

**Current Mailing Address:**

5027 S US HWY 17-92  
CASSELBERRY, FL 32707

**New Mailing Address:**

23 ALAFAYA WOODS BLVD  
#150  
OVIEDO, FL 32765

FEI Number: 59-1501282

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HICKS, RICHARD C JR  
12806 MAGNOLIA POINTE BLVD  
CLERMONT, FL 34711 US

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

HICKS, RICHARD C JR  
2511 MADRON COURT  
ORLANDO, FL 32806 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: RICHARD HICKS

01/07/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: CT  
Name: THOMPSON, B.FORREST  
Address: 2305 BUCKMINISTER CIRCLE  
City-St-Zip: ORLANDO, FL 32803

Title: D  
Name: THOMPSON, B. FOREST  
Address: 2305 BUCKMINISTER CIRCLE  
City-St-Zip: ORLANDO, FL 32803

Title: P  
Name: HICKS, RICHARD C JR  
Address: 2511 MADRON COURT  
City-St-Zip: ORLANDO, FL 32806

Title: AT  
Name: HICKS, JANET L  
Address: 2511 MADRON COURT  
City-St-Zip: ORLANDO, FL 32806

I hereby 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 all other like empowered.

SIGNATURE: RICHARD HICKS

P

01/07/2011

Electronic Signature of Signing Officer or Director

Date