

**2005 FOR PROFIT CORPORATION REINSTATEMENT**

**FILED  
Oct 11, 2005  
Secretary of State**

DOCUMENT# 469142

Entity Name: CPC OF FLORIDA, INC.

**Current Principal Place of Business:**

232 S. YONGE ST  
ORMOND BEACH, FL 32174

**New Principal Place of Business:**

**Current Mailing Address:**

232 S. YONGE ST  
ORMOND BEACH, FL 32174

**New Mailing Address:**

FEI Number: 59-1572365      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

CAVARRETTA, CHESTER P. SR.  
22 VILLAGE DRIVE  
ORMOND BCH, FL 32074      US

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

CAVARRETTA, CHESTER P. SR.  
2417 ORIOLE LANE  
SOUTH DAYTONA, FL 32119      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: CAVARRETTA, CHESTER P. SR.      10/11/2005  
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: PV      ( ) Delete  
Name: CAVARRETTA, CHESTER P  
Address: 3337 NORTH SIDE CIR  
City-St-Zip: EATON, NY 13334

Title: ST      ( ) Delete  
Name: CAVARRETTA, ROBERT D  
Address: 2417 ORIOLE LANE  
City-St-Zip: SOUTH DAYTONA, FL

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

Title: PV      (X) Change ( ) Addition  
Name: CAVARRETTA, CHESTER P  
Address: 2417 ORIOLE LANE  
City-St-Zip: SOUTH DAYTONA, FL 32119

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: CHESTER P. CAVARRETTA,SR.      P      10/11/2005  
Electronic Signature of Signing Officer or Director      Date