## 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F03000000726

Entity Name: SHEEPDOG IN LIQUIDATION 7, INC.

FILED Oct 21, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

4694 AVIATION PARKWAY, SUITE K 1750 TYSONS BOULEVARD ATLANTA, GA 30349

SUITE 530

MCLEAN, VA 22102

**Current Mailing Address: New Mailing Address:** 

1750 TYSONS BOULEVARD 1750 TYSONS BLVD., STE 1400 MC LEAN, VA 221024244

SUITE 530

MCLEAN, VA 22102

FEI Number: 58-1608013 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324

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: ANUSHA PUTTY

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change ( ) Addition

CHASTAIN, T.J. Name: Name: MILLER, DONALD E

8588 CANAL DRIVE 1750 TYSONS BOULEVARD, SUITE 530 Address: Address:

City-St-Zip: JONESBORO, GA 30236 City-St-Zip: MCLEAN, VA 22102

VD Title: Title: ( ) Delete (X) Change ( ) Addition

Name: COX. JERRY E Name: MCDONALD, MICHAEL L

905 OLD GREENVILLE ROAD 1750 TYSONS BOULEVARD, SUITE 530 Address: Address:

FAYETTEVILLE, GA 30215 MCLEAN, VA 22102 City-St-Zip: City-St-Zip:

Title: (X) Delete Title: () Change () Addition

MCDONALD, MICHAEL L Name: Name: 1750 TYSONS BLVD., STE 1400 Address: Address: MC LEAN, VA 221024244 City-St-Zip: City-St-Zip:

Title: (X) Delete Title: () Change () Addition

MILLER, DONALD E Name: Name: Address: 1750 TYSONS BLVD., STE 1400 Address: City-St-Zip: MC LEAN, VA 221024244 City-St-Zip:

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.

VΡ SIGNATURE: MICHAEL L. MCDONALD 10/21/2009