

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F04000006394

Entity Name: FOGEL & ASSOCIATES, INC.

FILED
Oct 16, 2009
Secretary of State

Current Principal Place of Business:

221 PARADISE POINT LANE
SANTA ROSA BEACH, FL 32459

New Principal Place of Business:

Current Mailing Address:

221 PARADISE POINT LANE
SANTA ROSA BEACH, FL 32459

New Mailing Address:

P.O. BOX 382075
BIRMINGHAM, AL 35238

FEI Number: 62-1138194

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FOGEL, RONALD
221 PARADISSE POINT LANE
SANTA ROSA BEACH, FL 32459 US

Name and Address of New Registered Agent:

FOGEL, HELEN
221 PARADISSE POINT LANE
SANTA ROSA BEACH, FL 32459 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: HELEN FOGEL

10/16/2009

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: C () Delete
Name: FOGEL, RONALD
Address: 221 PARADISE POINT LANE
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: DSTV () Delete
Name: FOGEL, BRUCE
Address: 3103 KEYSTONE DRIVE
City-St-Zip: BIRMINGHAM, AL 32459

Title: PD (X) Delete
Name: FOGEL, GLENN
Address: 3012 BROOK HIGHLAND DR.
City-St-Zip: BIRMINGHAM, AL 32459

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: FOGEL, GLENN
Address: 3012 BROOK HIGHLAND DRIVE
City-St-Zip: BIRMINGHAM, AL 35242

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 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: BRUCE FOGEL

DSTV

10/16/2009

Electronic Signature of Signing Officer or Director

Date