

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F05000001790

Entity Name: TALBOTT, ADAMS & MOORE, INC.

FILED  
Oct 10, 2006  
Secretary of State

## Current Principal Place of Business:

1603 BABCOCK RD, STE 172  
SAN ANTONIO, TX 78229

## New Principal Place of Business:

1603 BABCOCK RD, STE 155  
SAN ANTONIO, TX 78229

## Current Mailing Address:

4319 MEDICAL DR, STE 131-201  
SAN ANTONIO, TX 78229

## New Mailing Address:

FEI Number: 46-0491324      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: CT CORPORATION SYSTEM

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: DP ( ) Delete  
Name: SPEARS, GLENDA  
Address: 1603 BABCOCK RD, STE 172  
City-St-Zip: SAN ANTONIO, TX 78229

Title: DVP ( ) Delete  
Name: SPEARS, PHILLIP  
Address: 1603 BABCOCK RD, STE 172  
City-St-Zip: SAN ANTONIO, TX 78229

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: SPEARS, GLENDA  
Address: 1603 BABCOCK RD, STE 155  
City-St-Zip: SAN ANTONIO, TX 78229

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 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: GLENDA SPEARS

DP

10/10/2006

Electronic Signature of Signing Officer or Director

Date