

**2009 FOR PROFIT CORPORATION REINSTATEMENT**

**FILED  
Oct 29, 2009  
Secretary of State**

DOCUMENT# F08000000218

Entity Name: JIM POEKERT & ASSOCIATES, INC.

**Current Principal Place of Business:**

1111 E TOUHY AVENUE, SUITE 235  
DES PLAINES, IL 60018

**New Principal Place of Business:**

**Current Mailing Address:**

1111 E TOUHY AVENUE, SUITE 235  
DES PLAINES, IL 60018

**New Mailing Address:**

FEI Number: 26-1569758      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301      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: PAULA S. COLLINS, REGISTERED AGENT REP

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: WEISS, HASKEL  
Address: 1111 E TOUHY AVENUE, SUITE 235  
City-St-Zip: DES PLAINES, IL 60018

Title: DS      ( ) Delete  
Name: WEISS, ADAM  
Address: 1111 E TOUHY AVENUE, SUITE 235  
City-St-Zip: DES PLAINES, IL 60018

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

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: HASKEL WEISS

Electronic Signature of Signing Officer or Director

DIR

10/29/2009

Date