## 2009 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# F08000004033

**FILED** Oct 09, 2009 Secretary of State

Entity Name: WILLIAM NICHOLAS BODOUVA & ASSOCIATES, ARCHITECTS & PLANNERS, P.C.

**Current Principal Place of Business: New Principal Place of Business:** 512 SEVENTH AVE NEW YORK, NY 10018 **Current Mailing Address: New Mailing Address:** 512 SEVENTH AVE NEW YORK, NY 10018 FEI Number: 13-3188987 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: CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 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: WILLIAM NICHOLAS BODOUVA 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete () Change () Addition BODOUVA, WILLIAM N FAIA Name: Name: 5 CEDAR KNOLL ROAD Address: Address: City-St-Zip: SANDS POINT, NY 11050 City-St-Zip: Title: Title: () Delete () Change () Addition Name: BODOUVA, CHRISTINE J A1A Name: 5 CEDAR KNOLL ROAD Address: Address: SANDS POINT, NY 11050 City-St-Zip: City-St-Zip: ( ) Delete Title: Title: () Change () Addition BODOUVA, CHASE Name: Name: 7 TUDOR LANE Address: Address: City-St-Zip: SANDS POINT, NY 11050 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: WILLIAM NICHOLAS BODOUVA CP 10/09/2009