

# 2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F94000005545

Entity Name: FACTORY STORE, INC.

FILED  
Oct 27, 2004  
Secretary of State

**Current Principal Place of Business:**

51 PUTNEY ROAD  
BRATTLEBORO, VT 05302

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 483  
BRATTLEBORO, VT 05302

**New Mailing Address:**

FEI Number: 03-0193677

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BERG, SKIP  
1872 S. TAMiami TRAIL, SUITE D  
VENICE, FL 34293 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:

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: PVTD ( ) Delete  
Name: WILSON, GREGORY D  
Address: RIVER ROAD  
City-St-Zip: PUTNEY, VT 05346

Title: D ( ) Delete  
Name: OBUCHOWSKI, MICHAEL J  
Address: 72 ATKINSON ST.  
City-St-Zip: BELLOWS FALLS, VT 05101

Title: S ( ) Delete  
Name: COSTELLO, THOMAS W  
Address: 51 PUTNEY RD  
City-St-Zip: BRATTLEBORO, VT 05302

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 for the exemption stated in Section 119.07(3)(i), 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: THOMAS W. COSTELLO

S

10/27/2004

Electronic Signature of Signing Officer or Director

Date