

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F95000003643

Entity Name: INFOTRAC, INC.

FILED  
Nov 05, 2008  
Secretary of State

**Current Principal Place of Business:**

200 N PALMETTO ST  
CORP BUILDING  
LEESBURG, FL 34748 US

**New Principal Place of Business:**

**Current Mailing Address:**

200 N PALMETTO ST  
CORP BUILDING  
LEESBURG, FL 34748 US

**New Mailing Address:**

FEI Number: 36-3673835      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

KOB SR., ANTHONY  
200 N PALMETTO ST  
LEESBURG, FL 34748 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: ANTHONY J. KOB SR.

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: P ( ) Delete  
Name: KOB, ANTHONY SR  
Address: 1500 BEVERLY POINT  
City-St-Zip: LEESBURG, FL 34748

Title: S ( ) Delete  
Name: KOB, ANTHONY J JR  
Address: 200 N. PALMETTO  
City-St-Zip: LEESBURG, FL 34748

Title: T ( ) Delete  
Name: KOB, JASON S  
Address: 200 N. PALMETTO  
City-St-Zip: LEESBURG, FL 34748

**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 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: ANTHONY J. KOB SR

PRES

11/05/2008

Electronic Signature of Signing Officer or Director

Date