

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F95000004586

FILED
Feb 04, 2005
Secretary of State

Entity Name: ADVANCED STRATEGIES AGENCY, INC.

Current Principal Place of Business:

362 N. MAIN ST
HURON, OH 44839

New Principal Place of Business:

Current Mailing Address:

362 N. MAIN ST
HURON, OH 44839

New Mailing Address:

FEI Number: 34-1605027

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAVAGE, GARRY N SR
13105 VANDERBILT DR, UNIT 407
NAPLES, FL 33963 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: GARRY N SAVAGE 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: SAVAGE, GARRY N SR
Address: 362 N MAIN ST
City-St-Zip: HURON, OH 44839

Title: VP () Delete
Name: WARD, JEFFREY S
Address: 374 N. MAIN STREET
City-St-Zip: HURON, OH 44839

Title: EVPS () Delete
Name: SAVAGE, GARRY N JR.
Address: 362 N. MAIN ST
City-St-Zip: HURON, OH 44839

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: GARRY N SAVAGE

MR.

02/04/2005

Electronic Signature of Signing Officer or Director

Date