

**2004 FOR PROFIT CORPORATION REINSTATEMENT**

**FILED  
Oct 06, 2004  
Secretary of State**

DOCUMENT# H36230

Entity Name: CRISSE BATES FOSTER, P.A.

**Current Principal Place of Business:**

1329 BEDFORD DR.  
MELBOURNE, FL 32940 US

**New Principal Place of Business:**

1405 HIGHWAY A1A  
SATELLITE BEACH, FL 32937 US

**Current Mailing Address:**

P.O. BOX 372669  
SATELLITE BEACH, FL 329370669 US

**New Mailing Address:**

FEI Number: 59-2496894      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

FOSTER, CRISSE BATES  
1329 BEDFORD DRIVE  
SUITE 2  
MELBOURNE, FL 32940 US

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

FOSTER, CRISSE BATES  
1405 HIGHWAY A1A  
SATELLITE BEACH, FL 32937 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: CRIS BATES FOSTER      10/06/2004  
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: PD ( ) Delete  
Name: FOSTER, CRIS BATES,  
Address: 1329 BEDFORD DRIVE  
City-St-Zip: MELBOURNE, FL 32940

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

Title: PD (X) Change ( ) Addition  
Name: FOSTER, CRIS BATES,  
Address: 1405 HIGHWAY A1A, SUITE 403  
City-St-Zip: SATELLITE BEACH, FL 32937

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: CRIS BATES FOSTER      PRES      10/06/2004  
Electronic Signature of Signing Officer or Director      Date