

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# H82565

Entity Name: DKF DISTRIBUTORS, INC.

FILED
Oct 07, 2005
Secretary of State

Current Principal Place of Business:

108 ROCKINGHAM CT.
LONGWOOD, FL 32779 US

New Principal Place of Business:

101 BRIDGEWAY CIR
LONGWOOD, FL 32779 US

Current Mailing Address:

C/O DAVID K. FREY
P O BOX 915721
LONGWOOD, FL 327915721 US

New Mailing Address:

FEI Number: 59-2611269 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FREY, DAVID KENNETH
108 ROCKINGHAM CT
LONGWOOD, FL 32779 US

Name and Address of New Registered Agent:

FREY, DAVID KENNETH
101 BRIDGEWAY CIRCLE
LONGWOOD, FL 32779 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: DAVID K. FREY

10/07/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: FREY, DAVID KENNETH
Address: 108 ROCKINGHAM CT
City-St-Zip: LONGWOOD, FL 32779

Title: VP () Delete
Name: OGLE, JAMES E
Address: 6320 VERNON ST
City-St-Zip: ORLANDO, FL 32818

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: FREY, DAVID KENNETH
Address: 101 BRIDGEWAY CIR
City-St-Zip: LONGWOOD, FL 32779

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

Title: VP () Change (X) Addition
Name: CHARNLEY, WILLIAM
Address: 5 ALGIERS AVE.
City-St-Zip: WINTER SPRINGS, FL 32708

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: DAVID K. FREY

PTD

10/07/2005

Electronic Signature of Signing Officer or Director

Date