

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# H87849

**FILED**  
**Nov 08, 2011**  
**Secretary of State**

**Entity Name:** CRAWFORD LAW GROUP, P.A.

**Current Principal Place of Business:**

6150 S. FLORIDA AVE.  
2ND FLOOR  
LAKELAND, FL 33813 US

**New Principal Place of Business:**

625 COMMERCE DRIVE  
SUITE 304  
LAKELAND, FL 33813 US

**Current Mailing Address:**

P.O. BOX 5947  
LAKELAND, FL 33807 US

**New Mailing Address:**

**FEI Number:** 59-2598216

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

CRAWFORD, SIDNEY M.  
6150 S. FLORIDA AVE.  
2ND FLOOR  
LAKELAND, FL 33813 US

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

CRAWFORD, SIDNEY M.  
625 COMMERCE AVENUE  
SUITE 304  
LAKELAND, FL 33813 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: SIDNEY M. CRAWFORD

Electronic Signature of Registered Agent

11/08/2011

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: CRAWFORD, SIDNEY M.  
Address: 132 WOOD HALL DRIVE  
City-St-Zip: MULBERRY, FL

I hereby 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 all other like empowered.

SIGNATURE: SIDNEY M. CRAWFORD

Electronic Signature of Signing Officer or Director

PRES

11/08/2011

Date