

# 2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# K50538

Entity Name: WPI FLORIDA, INC.

FILED  
Oct 14, 2005  
Secretary of State

**Current Principal Place of Business:**

1629 K ST NW  
501  
WASHINGTON, DC 20006 US

**New Principal Place of Business:**

**Current Mailing Address:**

1629 K ST NW  
501  
WASHINGTON, DC 20006 US

**New Mailing Address:**

9816 S. MILITARY TRAIL  
C-2  
BOYNTON BEACH, FL 33436 US

FEI Number: 52-1603315

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

SAN FILIPPO, N. PAUL ESQ  
1100 5TH AVE SOUTH  
405  
NAPLES, FL 34102 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: N. PAUL SAN FILIPPO

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: DPT ( ) Delete  
Name: CAMALIER, F. DAVIS  
Address: 1629 K STREET N.W., STE. 501  
City-St-Zip: WASHINGTON, DC 20006 US

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

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: F. DAVIS CAMALIER

DPT

10/14/2005

Electronic Signature of Signing Officer or Director

Date