

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# L25136

FILED
Oct 08, 2009
Secretary of State

Entity Name: GREEN COVE SPRINGS BAIL BONDS, INC.

Current Principal Place of Business:

914 N ORANGE AVE
GREEN COVE SPRINGS, FL 32043 US

New Principal Place of Business:

Current Mailing Address:

914 N ORANGE AVE
GREEN COVE SPRINGS, FL 32043 US

New Mailing Address:

FEI Number: 59-2977743

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEVERS, KATHERINE
914 N ORANGE AVE
GREEN COVE SPRINGS, FL 32043 US

Name and Address of New Registered Agent:

SIEVERS, KATHERINE
914 N ORANGE AVE
GREEN COVE SPRINGS, FL 32043 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: KATHY SIEVERS

10/08/2009

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: SIEVERS, KATHERINE D
Address: 1700 IDLEWILD AVENUE
City-St-Zip: GREEN COVE SPRGS, FL 32043

Title: V () Delete
Name: SIEVERS, KATHERINE D
Address: 1700 IDLEWILD AVENUE
City-St-Zip: GREEN COVE SPRINGS, FL 32043 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SIEVERS, KATHERINE D
Address: 914 NORTH ORANGE AVENUE
City-St-Zip: GREEN COVE SPRGS, FL 32043

Title: V (X) Change () Addition
Name: SIEVERS, KATHERINE D
Address: 914 NORTH ORANGE AVENUE
City-St-Zip: GREEN COVE SPRINGS, FL 32043 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: KATHY SIEVERS

P

10/08/2009

Electronic Signature of Signing Officer or Director

Date