2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# L27074

Entity Name: ANTHONY J. SPANO, INC.

FILED Oct 20, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

% ANTHONY J. SPANO % JUDY S. DAVIS

400 N. RIVERSIDE DRIVE, APT. 408
POMPANO BEACH, FL 33062
400 N. RIVERSIDE DRIVE, APT. 408
POMPANO BEACH, FL 33062

Current Mailing Address:

% ANTHONY J. SPANO
400 N. RIVERSIDE DRIVE, APT. 408
POMPANO BEACH, FL 33062

% JAMES SPANO
742 GRATTAN STREET
CHICOPEE, MA 01020

FEI Number: 65-0169197 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

New Mailing Address:

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

SPANO, ANTHONY J.

400 NORTH RIVERSIDE DRIVE

APT. 408

POMPANO BEACH, FL 33062 US

DAVIS, JUDY S PRES

400 NORTH RIVERSIDE DRIVE

APT. 408

POMPANO BEACH, FL 33062 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: JUDY S. DAVIS 10/20/2009

Electronic Signature of Registered Agent

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Date

Title: D () Delete Title: D (X) Change () Addition

 Name:
 SPANO, ANTHONY J.
 Name:
 SPANO, JAMES A

 Address:
 400 N. RIVERSIDE DR #408
 Address:
 742 GRATTAN ST

 City-St-Zip:
 POMPANO BEACH, FL
 City-St-Zip:
 CHICOPEE, MA 01020

Name: DAVIS, JUDY S Name: DAVIS, JUDY S

Address: 60 LEXINGTON STREET Address: 400 N. RIVERSIDE DR #408
City-St-Zip: BURLINGTON, MA 01803 City-St-Zip: POMPANO BEACH, FL 33062

Title: T () Delete Title: () Change () Addition

 Name:
 MCCLURG, CAROLYN
 Name:

 Address:
 63 SHIPYARD DRIVE
 Address:

 City-St-Zip:
 HILTON HEAD, SC 29928
 City-St-Zip:

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: JAMES A. SPANO D 10/20/2009