

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# M92262

FILED
Jun 30, 2009
Secretary of State

Entity Name: P.A. MCCULLOUGH & ASSOCIATES, INC.

Current Principal Place of Business:

1819 MAIN STREET
SUITE 200
SARASOTA, FL 34236

New Principal Place of Business:

1819 MAIN STREET
SUITE 240
SARASOTA, FL 34236

Current Mailing Address:

1819 MAIN STREET
SUITE 200
SARASOTA, FL 34236

New Mailing Address:

1819 MAIN STREET
SUITE 240
SARASOTA, FL 34236

FEI Number: 65-0121289

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SEIDER, WILLIAM M
200 S. ORANGE AVENUE
SARASOTA, FL 34236 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: WILLIAM SEIDER

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: MCCULLOUGH, PAMELA A
Address: 1819 MAIN STREET, SUITE 200
City-St-Zip: SARASOTA, FL 34236

Title: PVS () Delete
Name: MCCULLOUGH, PAMELA A
Address: 1819 MAIN STREET, SUITE 200
City-St-Zip: SARASOTA, FL 34236

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MCCULLOUGH, PAMELA A
Address: 1819 MAIN STREET, SUITE 240
City-St-Zip: SARASOTA, FL 34236

Title: () Change () Addition
Name:
Address:
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: PAMELA A MCCULLOUGH

PRES

06/30/2009

Electronic Signature of Signing Officer or Director

Date