

# 2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N02000005574

Entity Name: DWELLING PLACE, INC.

FILED  
Oct 15, 2005  
Secretary of State

## Current Principal Place of Business:

1913 FALLING STAR LANE  
LUTZ, FL 33549

## New Principal Place of Business:

410 COUNTY LINE ROAD WEST  
LUTZ, FL 33548

## Current Mailing Address:

1913 FALLING STAR LANE  
LUTZ, FL 33549

## New Mailing Address:

410 COUNTY LINE ROAD WEST  
LUTZ, FL 33548

FEI Number: 02-0642123      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

FROST, EDWIN  
1913 FALLING STAR LANE  
LUTZ, FL 33549      US

## Name and Address of New Registered Agent:

FROST, EDWIN  
410 COUNTY LINE ROAD WEST  
LUTZ, FL 33548      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: EDWIN B. FROST

10/15/2005

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D      ( ) Delete  
Name: FROST, EDWIN  
Address: 1913 FALLING STAR LANE  
City-St-Zip: LUTZ, FL 33549

Title: D      ( ) Delete  
Name: FROST, JACK  
Address: 2443 LAUDELDAL DR  
City-St-Zip: LUTZ, FL 33549

Title: D      ( ) Delete  
Name: CIPHER, RICHARD  
Address: 24737 SILVERSMITH DR  
City-St-Zip: LUTZ, FL 33559

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D      (X) Change ( ) Addition  
Name: FROST, EDWIN  
Address: 410 COUNTY LINE ROAD WEST  
City-St-Zip: LUTZ, FL 33548

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EDWIN B. FROST

PRES

10/15/2005

Electronic Signature of Signing Officer or Director

Date