

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N03000008712

FILED
Nov 15, 2005
Secretary of State

Entity Name: COMMUNITY TAX INFORMATION SERVICES, INC.

Current Principal Place of Business:

4799 NW 7TH AVE, STE C
MIAMI, FL 33127

New Principal Place of Business:

Current Mailing Address:

4799 NW 7TH AVE, STE C
MIAMI, FL 33127

New Mailing Address:

FEI Number: 54-2408707 **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:

Name and Address of New Registered Agent:

ORPHE, JOHN
4799 NW 7TH AVE, STE B
MIAMI, FL 33127 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: JOHN D ORPHE

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: ORPHE, DIANE
Address: 605 NW 214 ST, UNIT 101
City-St-Zip: MIAMI, FL 33169

Title: DS () Delete
Name: DECOSTE, MALIA
Address: 186 NW 90TH ST
City-St-Zip: MIAMI, FL 33150

Title: D () Delete
Name: ORPHE, FRANK
Address: 186 NW 90TH ST
City-St-Zip: MIAMI, FL 33150

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: JOHN D ORPHE

CEO

11/15/2005

Electronic Signature of Signing Officer or Director

Date