

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Oct 10, 2008 8:00 A.M.
Secretary of State

DOCUMENT # N04000010213 1. Entity Name ROCKAIDS, INC.					
Principal Place of Business 1001 86TH AVE N ST. PETERSBURG, FL 33702			Mailing Address 1001 86TH AVE N ST. PETERSBURG, FL 33702		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 13-4289152	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ROBINSON, JANET M 1001 86TH AVE N ST. PETERSBURG, FL 33702			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <u><i>Janet M Robinson</i></u> 10-1-08 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) JANET M. ROBINSON President-Director					
FILE NOW!!! FEE IS \$236.25 After January 1, 2009, Fee will be \$297.50			Make check payable to Florida Department of State		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ROBINSON, JANET M 1001 86TH AVE N ST. PETERSBURG, FL 33702 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	100136806311 10/10/08--01015--003 **236.25 ☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD MCATASNEY, SCOTT 615 74TH AVE. N. SAINT PETERSBURG, FL 33702 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BENNETT, JAMES 768 PINELLAS POINT DR S ST. PETERSBURG, FL 33705 ☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD BRUNSON, ED 7400 21ST ST N ST PETERSBURG, FL 33702 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GUTHRIE, CHRISTINA 4131 18TH AVE N ST. PETERSBURG, FL 33713 ☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D O'DONNELL, MARK 6486 150TH AVE N CLEARWATER, FL 33760 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RODWICK, MD, BARRY 3135 STATE RD 580 SUITE 1 SAFETY HARBOR, FL 34695 ☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD MANN, MARK 4120 18TH AVE N SAINT PETERSBURG, FL 33713 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DOLGIN, CARMELLA 555 85TH AVE. LN SAINT PETERSBURG, FL 33702 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Note: Blocks 10 & 11 represent all 9 officers/directors. ☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u><i>Janet M Robinson</i></u> JANET M. ROBINSON 10-1-08 727-420-6269 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

JC 10/10