

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N08000005079

FILED
Nov 10, 2009
Secretary of State

Entity Name: ONE LESS, INC.

Current Principal Place of Business:

4301 BAYSHORE BLVD.
TAMPA, FL 33611

New Principal Place of Business:

Current Mailing Address:

PO BOX 20914
TAMPA, FL 33622

New Mailing Address:

FEI Number: 26-3031909 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

CORPORATE CREATIONS NETWORK INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS,, FL 33410 US

Name and Address of New Registered Agent:

WOOD, BRADLEY J ESQ.
600 FIRST AVENUE NORTH
SUITE 302
ST. PETERSBURG, FL 33701 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: BRADLEY J. WOOD

11/10/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WHITE, RANDY
Address: 4801 BAYSHORE BLVD.
City-St-Zip: TAMPA, FL 33611

Title: D () Delete
Name: HAMILTON, DAVID
Address: 8417 WALTER MARTZ RD.
City-St-Zip: FREDERICK, MD 21702

Title: D () Delete
Name: SHEFFIELD, GARY
Address: 922 ANCHORAGE RD.
City-St-Zip: TAMPA, FL 33602

Title: D () Delete
Name: GULLEDGE, MICHAEL
Address: 612 FERN ST.
City-St-Zip: PALATKA, FL 32177

Title: D () Delete
Name: GULLEDGE, JEAN
Address: 612 FERN ST
City-St-Zip: PALATKA, FL 32177

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:

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

SIGNATURE: RANDY WHITE

D

11/10/2009

Electronic Signature of Signing Officer or Director

Date