

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N08000009337

FILED
Oct 09, 2009
Secretary of State

Entity Name: IHS PRODUCTIONS INC.

Current Principal Place of Business:

826 HERON ROAD
COCOA, FL 329262321

New Principal Place of Business:

826 HERON ROAD
COCOA, FL 32926

Current Mailing Address:

826 HERON ROAD
COCOA, FL 329262321

New Mailing Address:

826 HERON ROAD
COCOA, FL 32926

FEI Number: 55-0759879 **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:

MCDOWELL, DAVID E
826 HERON ROAD
COCOA, FL 329262321 US

Name and Address of New Registered Agent:

MCDOWELL, DAVID E
826 HERON ROAD
COCOA, FL 32926 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: DAVID E MCDOWELL

10/09/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PCD () Delete
Name: MCDOWELL, DAVIE
Address: 826 HERON ROAD
City-St-Zip: COCOA, FL 329262321

Title: TD () Delete
Name: MCDOWELL, SHERRY JO
Address: 826 HERON ROAD
City-St-Zip: COCOA, FL 329262321

Title: D () Delete
Name: PAINTER, JEFF
Address: 308 BELLAIR DRIVE
City-St-Zip: COCOA, FL 32922

Title: D () Delete
Name: LARSON, SHARYN
Address: 5951 WELLESLEY PARK DRIVE, APT 102
City-St-Zip: BOCA RATON, FL 33433

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCD (X) Change () Addition
Name: MCDOWELL, DAVID E
Address: 826 HERON ROAD
City-St-Zip: COCOA, FL 32926

Title: TD (X) Change () Addition
Name: WADSWORTH, LATASHA N
Address: 801 CHELLO AVENUE
City-St-Zip: PALM BAY, FL 32905

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

Title: D (X) Change () Addition
Name: LARSON, SHARYN
Address: 6411 BORASCO DRIVE APT 210
City-St-Zip: MELBOURNE, FL 32940

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: DAVID E UGENE MCDOWELL

PCD

10/09/2009

Electronic Signature of Signing Officer or Director

Date