

# **2011 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N27099

**FILED**  
**Oct 05, 2011**  
**Secretary of State**

**Entity Name:** PRIVATE INVESTIGATOR'S ASSOCIATION OF FLORIDA, INC.

**Current Principal Place of Business:**

3200 MORNING GLORY CT  
PALM BEACH GARDENS, FL 33410

**New Principal Place of Business:**

1063 1/2 GEORGE JENKINS BLVD  
LAKELAND, FL 33815

**Current Mailing Address:**

PO BOX 1711  
JUPITER, FL 334681711 US

**New Mailing Address:**

PO BOX 2685  
LAKELAND, FL 33806 US

**FEI Number:** 59-3016012

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GOLD, ALICE  
3200 MORNING GLORY CT  
PALM BEACH GARDENS, FL 33410 US

**Name and Address of New Registered Agent:**

DONNELLAN, HEATHER F  
1063 1/2 GEORGE JENKINS BLVD  
LAKELAND, FL 33815 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: HEATHER DONNELLAN

10/05/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: OROURKE, TIMOTHY  
Address: P.O. BOX 2685  
City-St-Zip: LAKELAND, FL 33806 US

Title: VP  
Name: HODGE, BURT  
Address: P.O. BOX 2685  
City-St-Zip: LAKELAND, FL 33806 US

Title: VP2  
Name: MCMAHON, RORY  
Address: P.O. BOX 2685  
City-St-Zip: LAKELAND, FL 33806 US

Title: T  
Name: DONNELLAN, HEATHER F  
Address: P.O. BOX 2685  
City-St-Zip: LAKELAND, FL 33806 US

I hereby 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 all other like empowered.

SIGNATURE: HEATHER DONNELLAN

TREA

10/05/2011

Electronic Signature of Signing Officer or Director

Date