

# 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N32913

FILED  
Oct 01, 2009  
Secretary of State

Entity Name: TBJVC, INC.

## Current Principal Place of Business:

3004 SAMARA DR  
TAMPA, FL 33618 US

## New Principal Place of Business:

405 SOUTH DALE MABRY HWY  
SUITE 126  
TAMPA, FL 33609 US

## Current Mailing Address:

3004 SAMARA DR  
TAMPA, FL 33618 US

## New Mailing Address:

405 SOUTH DALE MABRY HWY  
SUITE 126  
TAMPA, FL 33609 US

FEI Number: 59-2998480

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

OCARROLL, MELANEY  
3004 SAMARA DR  
TAMPA, FL 33618 US

## Name and Address of New Registered Agent:

DAGOSTINO, LAURI EX DIR  
2812 WEST PRICE AVE  
TAMPA, FL 33611 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: LAURI DAGOSTINO

10/01/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: DAGOSTINO, RAMON RANDY  
Address: 2812 PRICE AVE.  
City-St-Zip: TAMPA, FL 33611

Title: D ( ) Delete  
Name: O'CARROLL, MELANEY  
Address: 3004 SAMARA DR.  
City-St-Zip: TAMPA, FL 33618

Title: S ( ) Delete  
Name: DAGOSTINO, LAURI  
Address: 2812 PRICE AVE.  
City-St-Zip: TAMPA, FL 33611

Title: D ( ) Delete  
Name: NORMAN, MARGARET  
Address: 1302 HOLIDAY DRIVE  
City-St-Zip: BRANDON, FL 33510

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: MICHELLE, COLLIER  
Address: 5125 PALM SPRINGS BLVD #4302  
City-St-Zip: TAMPA, FL 33647

Title: D (X) Change ( ) Addition  
Name: BURGESS, DEE  
Address: 3819 W DALE AVE #5  
City-St-Zip: TAMPA, FL 33607

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

Title: D (X) Change ( ) Addition  
Name: RAMON, DAGOSTINO R  
Address: 2812 WEST PRICE AVE  
City-St-Zip: TAMPA, FL 33611

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: LAURI DAGOSTINO

S

10/01/2009

Electronic Signature of Signing Officer or Director

Date