## 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N95000005291

FILED Oct 04, 2009 Secretary of State

Entity Name: MONKEY ANTICS PRIMATES HELPING PRIMATES, INC.

Current Principal Place of Business: New Principal Place of Business:

2827 SW 116TH AVE 6233 CR 609

WEBSTER, FL 33597 US #E-2

BUSHNELL, FL 33513 US

Current Mailing Address: New Mailing Address:

2827 SW 116TH AVE 6233 CR 609

WEBSTER, FL 33597 US #E-2

BUSHNELL, FL 33513 US

FEI Number: 59-3343940 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: Name and Address of New Registered Agent:

ROSNER, PAUL E ROSNER, PAUL E 2827 SW 116TH AVE 6233 CR 609

WEBSTER, FL 33597 US #E-2 BUSHNELL, FL 33513 US

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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: PAUL E ROSNER 10/04/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

tle: PSTD ( ) Delete Title: PSTD (X) Change ( ) Addition

 Name:
 ROSNER, PAUL E
 Name:
 ROSNER, PAUL E

 Address:
 2827 SW 116TH AVE
 Address:
 6233 CR 609, #E-2

 City-St-Zip:
 WEBSTER, FL 33597 US
 City-St-Zip:
 BUSHNELL, FL 33513 US

Title: VD ( ) Delete Title: D (X) Change ( ) Addition Name: ST CLAIR, ROBERTA ST CLAIR, ROBERTA

Address: 2827 SW 116TH AVE
City-St-Zip: WEBSTER, FL 33597 US

Name: ST CEAIR, ROBERTA
Address: 2827 SW 116TH AVE
City-St-Zip: WEBSTER, FL 33597 US

 $\label{eq:title:D} {\sf Title:} \qquad {\sf D} \qquad (\ ) \, {\sf Delete} \qquad \qquad {\sf Title:} \qquad {\sf VD} \qquad ({\sf X}) \, {\sf Change} \, (\ ) \, {\sf Addition}$ 

 Name:
 HANNON, JOY L
 Name:
 HANNON, JOY L

 Address:
 161 S ROOKS AVE
 Address:
 161 S ROOKS AVE

 City-St-Zip:
 INVERNESS, FL 34453 US
 City-St-Zip:
 INVERNESS, FL 34453 US

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: PAUL E ROSNER P 10/04/2009