

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N98000003141

FILED
Feb 02, 2006
Secretary of State

Entity Name: INSIDE/OUTSIDE, INC.

Current Principal Place of Business:

423 WEST 23RD STREET
JACKSONVILLE, FL 32207

New Principal Place of Business:

423 WEST 23RD STREET
JACKSONVILLE, FL 32206

Current Mailing Address:

423 WEST 23RD STREET
JACKSONVILLE, FL 32207

New Mailing Address:

423 WEST 23RD STREET
JACKSONVILLE, FL 32206

FEI Number: 59-3514414

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOLDMAN, CATHY C
9448 BEAUCLERC TERRACE
JACKSONVILLE, FL 32216 US

Name and Address of New Registered Agent:

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: CATHY GOLDMAN

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GOLDMAN, CATHY C
Address: 9448 BEAUCLERC TERR
City-St-Zip: JACKSONVILLE, FL 32216

Title: D () Delete
Name: POINDEXTER, CAROLE J
Address: 7892 BAYMEADOWS WAY
City-St-Zip: JACKSONVILLE, FL 32256

Title: SD () Delete
Name: FISHER, JOHNNIE B
Address: 7915 BELLEMEADE BLVD S
City-St-Zip: JACKSONVILLE, FL 32211

Title: D () Delete
Name: BEVEL, JACKIE
Address: 1347 SHEARWATER DR
City-St-Zip: JACKSONVILLE, FL 32218

Title: T () Delete
Name: JONES, JEAN E
Address: 1427 MAPLE FON ROAD
City-St-Zip: JACKSONVILLE, FL 32207

Title: D () Delete
Name: MAURER, CHARLES
Address: 2749 GRAYTON COURT
City-St-Zip: JACKSONVILLE, FL 32244

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WILFORD, DON P
Address: 5150 BELFORT ROAD BLDG #700
City-St-Zip: JACKSONVILLE, FL 32256

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

Title: SD (X) Change () Addition
Name: FISHER, JOHNNIE B
Address: 345 N. SHORE CIRCLE #1222
City-St-Zip: ST. AUGUSTINE, FL 32092

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 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: JOHNNIE B. FISHER

D

02/02/2006

Electronic Signature of Signing Officer or Director

Date