

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P00000000271

**FILED**  
**Sep 28, 2011**  
**Secretary of State**

**Entity Name:** P & P COMMUNICATIONS, INC.

**Current Principal Place of Business:**

1550 MELVIN STREET  
TALLAHASSEE, FL 32301

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 15827  
TALLAHASSEE, FL 323175827

**New Mailing Address:**

1404 SAINT JAMES ROAD  
ACCOKEEK, MD 206072921 US

**FEI Number:** 59-3618998

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

GRAYSON, JOHN  
118 SALEM COURT  
SUITE B  
TALLAHASSEE, FL 32301 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:** JOHN M. GRAYSON, CPA, MBA

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** LETTMAN-HICKS, SHARON J  
**Address:** 1404 SAINT JAMES ROAD  
**City-St-Zip:** ACCOKEEK, MD 206072921 US

**Title:** VP  
**Name:** HICKS, ALVIN B  
**Address:** 1404 SAINT JAMES ROAD  
**City-St-Zip:** ACCOKEEK, MD 206072921 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** SHARON J. LETTMAN-HICKS

P

09/28/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date