

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P00000006512

FILED  
Feb 15, 2008  
Secretary of State

Entity Name: DIGITAL NETWORK SYSTEMS, INC.

## Current Principal Place of Business:

1414 RAILHEAD BLVD  
NAPLES, FL 34110

## New Principal Place of Business:

401 E. LAS OLAS BLVD #130-229  
FT LAUDERDALE, FL 33301

## Current Mailing Address:

PO BOX 112529  
NAPLES, FL 34108

## New Mailing Address:

401 E. LAS OLAS BLVD #130-229  
FT LAUDERDALE, FL 33301

FEI Number: 59-3617349

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NICHOLSON, JOHN R  
911 17ST SW  
NAPLES, FL 34117 US

## Name and Address of New Registered Agent:

STRUBLE, ERIC A  
660 11TH AVE. NE #101  
FT LAUDERDALE, FL 33301 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: ERIC A. STRUBLE

02/15/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( )

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: NICHOLSON, JOHN  
Address: 911 17 ST S W  
City-St-Zip: NAPLES, FL 34117

Title: VP ( ) Delete  
Name: STRUBLE, ERIC  
Address: 9932 COLONIAL W  
City-St-Zip: ESTERO, FL 33928

Title: T (X) Delete  
Name: NICHOLSON, WILLIAM  
Address: 1266 DUNWOODY KNOLL  
City-St-Zip: ATLANTA, GA 30337

Title: S (X) Delete  
Name: HARMON, CATHERINE  
Address: 1266 DUNWOODY KNOLL  
City-St-Zip: ATLANTA, GA 30337

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S,VP (X) Change ( ) Addition  
Name: NICHOLSON, JOHN R  
Address: 7778 ASHTON RD.  
City-St-Zip: NAPLES, FL 34113

Title: P (X) Change ( ) Addition  
Name: STRUBLE, ERIC  
Address: 660 NE 11TH AVE. #101  
City-St-Zip: FT LAUDERDALE, FL 33301

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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN R. NICHOLSON

S

02/15/2008

Electronic Signature of Signing Officer or Director

Date