2009 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# P00000015851

Entity Name: GARDENS SOUTH-JAX. INC.

Current Principal Place of Business:

835 LAWHON DR.
JACKSONVILLE, FL 32259

New Principal Place of Business:

12489 SAN JOSE BLVD. SUITE #4
SUITE #4
JACKSONVILLE, FL 32223

Current Mailing Address:

835 LAWHON DR.
JACKSONVILLE, FL 32259

New Mailing Address:

12489 SAN JOSE BLVD. SUITE #4
SUITE #4
JACKSONVILLE, FL 32223

FEI Number: 59-3625404 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RICE, LEE III
835 LAWHON DR.
JACKSONVILLE, FL 32259 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: LEE RICE III

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: RICE, LEE B III
Address: 835 LAWHON DR.
City-St-Zip: JACKSONVILLE, FL 32259

Title: ST ( ) Delete
Name: RICE, ADAM J
Address: 165 SOUTHERN BRIDGE BLVD UNIT 6
City-St-Zip: JACKSONVILLE, FL 32259

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: TREA (X) Change ( ) Addition
Name: RICE, ADAM J
Address: 172 FLOWER OF SCOTLAND AVE.
City-St-Zip: SAINT JOHNS, FL 32259

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: ADAM RICE TREA 04/30/2009

Electronic Signature of Signing Officer or Director Date