## 2005 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P00000020853

City-St-Zip:

PARKLAND, FL 33076

**FILED** Sep 21, 2005 Secretary of State

**Entity Name: PALM GLADE ACQUISITION CORPORATION Current Principal Place of Business: New Principal Place of Business:** 2000 S. MAIN STREET BELLE GLADE, FL **Current Mailing Address: New Mailing Address:** 671 N.E. 105 STREET MIAMI SHORES, FL 33138 FEI Number: 65-1093804 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WASHINGTON, LYNN C ESQ. HURCHALLA, JAMES J ESQ HOLLAND & KNIGHT LLP 888 E LAS OLAS BOULEVARD 701 BRICKELL AVENUE, STE. 3000 SUITE 200 MIAMI, FL 33131 US FORT 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: JAMES J HURCHALLA, ESQUIRE 09/21/2005 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition HALL, CHRISTOPHER J Name: Name: 2843 S. BAYSHORE DRIVE, #P3D Address: Address: City-St-Zip: MIAMI, FL 33133 City-St-Zip: Title: VΡ Title: () Delete () Change () Addition JOHNSON, THOMAS R Name: Name: 21 HORIZON DRIVE Address: Address: SARATOGA SPRINGS, FL 32866 City-St-Zip: City-St-Zip: Title: Title: ( ) Delete () Change () Addition DEWALD, FRANCIS R Name: Name: 1192 NW 71ST CT Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

City-St-Zip:

SIGNATURE: FRANCIS ROBERT DEWALD 09/21/2005 S