

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P00000029362

Entity Name: ROVADA, INC.

**FILED**  
**Sep 29, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

3593 SOUTH ORANGE AVENUE  
ORLANDO, FL 32806

**New Principal Place of Business:**

3595 SOUTH ORANGE AVENUE  
ORLANDO, FL 32806

**Current Mailing Address:**

3519 GATLIN AVENUE  
ORLANDO, FL 32812

**New Mailing Address:**

8619 WARWICK SHORE CROSSING  
ORLANDO, FL 32829

FEI Number: 59-3636208

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DAVIS, ROBERT E.  
3593 S ORANGE AVENUE  
ORLANDO, FL 32806 US

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

DAVIS, ROBERT E.  
3595 S ORANGE AVENUE  
ORLANDO, FL 32806 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: ROBERT E. DAVIS

09/29/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: DAVIS, ROBERT E  
Address: 8619 WARWICK SHORE CROSSING  
City-St-Zip: ORLANDO, FL 32829

Title: VPST  
Name: DAVIS, VALARIE L  
Address: 8619 WARWICK SHORE CROSSING  
City-St-Zip: ORLANDO, FL 32829

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: VALARIE L. DAVIS

VPST

09/29/2011

Electronic Signature of Signing Officer or Director

Date