

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P00000033591

FILED
Sep 30, 2008
Secretary of State

Entity Name: LOCKWOOD FREELAND COMMERCIAL REALTY, INC.

Current Principal Place of Business:

3947 BOULEVARD CENTER DRIVE
SUITE 100
JACKSONVILLE, FL 32207

New Principal Place of Business:

751 OAK STREET
SUITE 610
JACKSONVILLE, FL 32204

Current Mailing Address:

P.O. BOX 10233
JACKSONVILLE, FL 32247

New Mailing Address:

FEI Number: 59-3638601

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOCKWOOD, JOHN D
3947 BOULEVARD CENTER DRIVE
SUITE 100
JACKSONVILLE, FL 32207 US

Name and Address of New Registered Agent:

LOCKWOOD, JOHN D
751 OAK STREET
SUITE 610
JACKSONVILLE, FL 32204 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: JOHN D. LOCKWOOD

09/30/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LOCKWOOD, JOHN D
Address: 3947 BOULEVARD CENTER DR, SUITE 100
City-St-Zip: JACKSONVILLE, FL 32207

Title: VSD () Delete
Name: FREELAND, BARBARA A
Address: 3947 BOULEVARD CENTER DRIVE, SUITE 100
City-St-Zip: JACKSONVILLE, FL 32207

Title: TD () Delete
Name: FREELAND, ROBERT C
Address: 3947 BOULEVARD CENTER DRIVE, SUITE 100
City-St-Zip: JACKSONVILLE, FL 32207

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LOCKWOOD, JOHN D
Address: 751 OAK STREET SUITE 610
City-St-Zip: JACKSONVILLE, FL 32204

Title: VSD (X) Change () Addition
Name: FREELAND, BARBARA A
Address: 750 OAK STREET SUITE 610
City-St-Zip: JACKSONVILLE, FL 32204

Title: TD (X) Change () Addition
Name: FREELAND, ROBERT C
Address: 751 OAK STREET SUITE 610
City-St-Zip: JACKSONVILLE, FL 32204

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: BARBARA A. FREELAND

VSD

09/30/2008

Electronic Signature of Signing Officer or Director

Date