2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P00000101890

Entity Name: PROMOTE, INC.

FILED Oct 09, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

 1422 NE 1 STREET
 2576 HODGES FERRY RD

 CAPE CORAL, FL 33909
 KODAK, TN 37764

Current Mailing Address: New Mailing Address:

 1422 NE 1 STREET
 2576 HODGES FERRY RD

 CAPE CORAL, FL 33909
 KODAK, TN 37764

FEI Number: 65-1052853 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:

MONDELL, DONALD M

1422 NE 1 STREET

CAPE CORAL, FL 33909 US

MONDELL, AMBER L

1422 NE 1ST STREET

CAPE CORAL, FL 33909 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: AMBER L MONDELL 10/09/2005

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition MONDELL, DONALD M MONDELL, DONALD M Name: Name: **1422 NE 1 STREET** 2576 HODGES FERRY RD Address: Address: City-St-Zip: CAPE CORAL, FL 33909 City-St-Zip: KODAK, TN 37764

Title: ST () Delete Title: ST (X) Change () Addition Name: MONDELL, LAURA M Name: MONDELL, LAURA M

Address: 1422 NE 1 STREET Address: 2576 HODGES FERRY RD City-St-Zip: CAPE CORAL, FL 33909 City-St-Zip: KODAK, TN 37764

Title: D (X) Delete Title: () Change () Addition

 Name:
 WILKES, GARY
 Name:

 Address:
 1631 PINE AVE
 Address:

 City-St-Zip:
 ALVA, FL 33920
 City-St-Zip:

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.

SIGNATURE: LAURA M MONDELL ST 10/09/2005