

2005 FOR PROFIT CORPORATION REINSTATEMENT

**FILED
Sep 20, 2005
Secretary of State**

DOCUMENT# P01000056279

Entity Name: GO ASK ALICE, INC.

Current Principal Place of Business:

121 SHORELINE AVE
SATSUMA, FL 32189

New Principal Place of Business:

Current Mailing Address:

121 SHORELINE AVE
SATSUMA, FL 32189

New Mailing Address:

FEI Number: 14-1924287 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZOLEZZI, CARL K
399 REID STREET
PALATKA, FL 32177 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: CARL K ZOLEZZI

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ZOLEZZI, CARL K
Address: 399 REID STREET
City-St-Zip: PALATKA, FL 32177

Title: S (X) Delete
Name: CREWS, ALICE
Address: 121 SHORELINE AVE
City-St-Zip: SATSUMA, FL 32189

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CREWS, ALICE
Address: 121 SHORELINE AVE
City-St-Zip: SATSUMA, FL 32189

Title: () Change () Addition
Name:
Address:
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: ALICE CREWS

Electronic Signature of Signing Officer or Director

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09/20/2005

Date