

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000089297

FILED
Oct 29, 2009
Secretary of State

Entity Name: EDWIN C. CLUSTER MEDIATION COMPANY

Current Principal Place of Business:

21 NE FIRST AVE
OCALA, FL 34470

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 1148
OCALA, FL 34478

New Mailing Address:

FEI Number: 59-3746226

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CLUSTER, EDWIN C
21 NE FIRST AVE
OCALA, FL 34470 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: EDWIN C. CLUSTER

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:

Title: PTSD () Delete
Name: CLUSTER, EDWIN C
Address: POST OFFICE BOX 1148
City-St-Zip: OCALA, FL 34478

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: EDWIN C. CLUSTER

Electronic Signature of Signing Officer or Director

PRES

10/29/2009

Date