

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000000480

Entity Name: TPF INVESTMENTS, INC.

FILED
Mar 01, 2007
Secretary of State

Current Principal Place of Business:

2520 SR 207
ST AUGUSTINE, FL 32084

New Principal Place of Business:

101 E. ASHLAND AVE
SUITE 2 A
HASTINGS, FL 32145

Current Mailing Address:

P.O. BOX 618
ST AUGUSTINE, FL 32085

New Mailing Address:

FEI Number: 26-0002189 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PACETTI, CHARLES A
2520 SR 207
ST AUGUSTINE, FL 32084 US

Name and Address of New Registered Agent:

BUSBEE, SUZANNE P
101 E. ASHLAND AVE
SUITE 2 A
HASTINGS, FL 32145 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: SUZANNE P. BUSBEE 03/01/2007

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: PS () Delete
Name: PACETTI, CHARLES A
Address: 2520 SR 207
City-St-Zip: ST AUGUSTINE, FL 32084

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change () Addition
Name: BUSBEE, SUZANNE P
Address: P.O. BOX 618
City-St-Zip: ST AUGUSTINE, FL 32085 US

Title: VP () Change (X) Addition
Name: PACETTI, CHARLES A
Address: P.O. BOX 618
City-St-Zip: ST AUGUSTINE, FL 32085 US

Title: VP () Change (X) Addition
Name: BARBOUR, CASSANDRA P
Address: P.O. BOX 618
City-St-Zip: ST AUGUSTINE, FL 32085 US

Title: VP () Change (X) Addition
Name: PACETTI TENNYSON, CHEYENNE
Address: P.O. BOX 618
City-St-Zip: ST AUGUSTINE, FL 32085

I hereby certify that the information supplied with this filing does not qualify for the 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: CHARLES A. PACETTI VP 03/01/2007

Electronic Signature of Signing Officer or Director Date