2009 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Dec 01, 2009
Secretary of State

DOCUMENT# P02000029703

Entity Name: SANTA PROPERTIES CORP.

Current Principal Place of Business:

5364-171 EHRLICH RD
TAMPA, FL 33624

New Principal Place of Business:

Current Mailing Address:

5364-171 EHRLICH RD
TAMPA, FL 33624

New Mailing Address:

FEI Number: 03-0416875 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FEINBERG, JEFFREY
4000 HOLLYWOOD BLVD, STE 350-N
HOLLYWOOD, FL 33021 US

Name and Address of New Registered Agent:

DIBBS, SHANE D
5364 EHRLICH ROAD
171
TAMPA, FL 33624 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: SHANE DIBBS 12/01/2009
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: PTD ( ) Delete
Name: DIBBS, MICHAEL
Address: 5364-171 EHRLICH RD
City-St-Zip: TAMPA, FL 33624

Title: V ( ) Delete
Name: DIBBS, STEVEN
Address: 5364-171 EHRLICH RD
City-St-Zip: TAMPA, FL 33624

Title: S ( ) Delete
Name: DIBBS, SHAWNEKA
Address: 5364-171 EHRLICH RD
City-St-Zip: TAMPA, FL 33624

Title: T ( ) Delete
Name: DIBBS, SHANE
Address: 5364-171 EHRLICH RD
City-St-Zip: TAMPA, FL 33624

Title: D ( ) Delete
Name: DIBBS, PAULETTE
Address: 5364-171 EHRLICH RD
City-St-Zip: TAMPA, FL 33624

Title: C ( ) Delete
Name: DIBBS, VICTORIA
Address: 5364-171 EHRLICH RD
City-St-Zip: TAMPA, FL 33624

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: MICHAEL DIBBS P 12/01/2009
Electronic Signature of Signing Officer or Director Date