

# 2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000047418

FILED  
Oct 20, 2004  
Secretary of State

**Entity Name:** CUNNINGHAM PROPERTY CO. OF S.W. FLORIDA, INC.

**Current Principal Place of Business:**

18211 DEEP PASSAGE LANE  
FORT MYERS, FL 33931

**New Principal Place of Business:**

**Current Mailing Address:**

18211 DEEP PASSAGE LANE  
FORT MYERS, FL 33931

**New Mailing Address:**

**FEI Number:** 04-3614292

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CUNNINGHAM, DONALD S  
18211 DEEP PASSAGE LANE  
FORT MYERS, FL 33931 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:**

\_\_\_\_\_  
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:** P ( ) Delete  
**Name:** CUNNINGHAM, DONALD S  
**Address:** 18211 DEEP PASSAGE LANE  
**City-St-Zip:** FORT MYERS, FL 33931

**Title:** VST ( ) Delete  
**Name:** CUNNINGHAM, JACALYN L  
**Address:** 18211 DEEP PASSAGE LANE  
**City-St-Zip:** FORT MYERS, FL 33931

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

**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 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:** DONALD CUNNINGHAM

PRES

10/20/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date