# 2008 FOR PROFIT CORPORATION REINSTATEMENT

**FILED**
**Feb 03, 2008**
**Secretary of State**

DOCUMENT# P02000060275

**Entity Name:** BELLEMARE, INC.

**Current Principal Place of Business:**

602 FRANCIS STREET
STARKE, FL 32091 US

**New Principal Place of Business:**

11627 SUMMIT ROCK CRT
PARRISH, FL 34219 US

**Current Mailing Address:**

602 FRANCIS STREET
STARKE, FL 32091 US

**New Mailing Address:**

P O BOX 508
PALMEETO, FL 34220

**FEI Number: 11-3646246** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

BELLEMARE, PIERRE A
602 FRANCIS STREET
STARKE, FL 32091 US

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

BELLEMARE, PIERRE A
11627 SUMMIT ROCK CRT
PARRISH, FL 34219 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: PIERRE A. BELLEMARE 02/03/2008
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: D ( ) Delete
Name: BELLEMARE, PIERRE A
Address: 602 FRANCIS STREET
City-St-Zip: STARKE, FL 32091

Title: D ( ) Delete
Name: BELLEMARE, LINDA L
Address: 602 FRANCIS STREET
City-St-Zip: STARKE, FL 32091

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

Title: DP (X) Change ( ) Addition
Name: BELLEMARE, PIERRE A
Address: 11627 SUMMIT ROCK CRT
City-St-Zip: PARRISH, FL 34219

Title: DST (X) Change ( ) Addition
Name: BELLEMARE, LINDA L
Address: 11627 SUMMIT ROCK CRT
City-St-Zip: PARRISH, FL 34219

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: PIERRE A. BELLEMARE DP 02/03/2008
Electronic Signature of Signing Officer or Director Date