

# **2012 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P02000076676

**FILED**  
**Sep 07, 2012**  
**Secretary of State**

**Entity Name:** CAUSEWAY SERVICES, INC.

**Current Principal Place of Business:**

2601 SOUTH ANDREWS AVENUE  
FORT LAUDERDALE, FL 33316

**New Principal Place of Business:**

**Current Mailing Address:**

2601 SOUTH ANDREWS AVENUE  
FORT LAUDERDALE, FL 33316

**New Mailing Address:**

**FEI Number:** 06-1644760

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WHIDDON, M. SCOTT  
2601 SOUTH ANDREWS AVENUE  
FORT LAUDERDALE, FL 33316 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: M. SCOTT WHIDDON

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: WHIDDON, M. SCOTT  
Address: 2601 SOUTH ANDREWS AVENUE  
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: STD  
Name: WHIDDON, ANGELYN  
Address: 2601 SOUTH ANDREWS AVENUE  
City-St-Zip: FORT LAUDERDALE, FL 33316

I hereby 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 all other like empowered.

SIGNATURE: M. SCOTT WHIDDON

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

PD

09/07/2012

\_\_\_\_\_  
Date