

# **2010 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P02000130164

**FILED**  
**Sep 29, 2010**  
**Secretary of State**

**Entity Name:** PEASE & ASSOCIATES, INC.

**Current Principal Place of Business:**

2433 THOMAS DRIVE  
124  
PANAMA CITY, FL 32408 US

**Current Mailing Address:**

2433 THOMAS DRIVE  
124  
PANAMA CITY, FL 32408 US

**New Principal Place of Business:**

5 MIRACLE STRIP LOOP  
14  
PANAMA CITY BEACH, FL 32417 US

**New Mailing Address:**

PO BOX 9418  
PANAMA CITY, FL 32417 US

**FEI Number:** 22-3886638

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PEASE, CLARA  
2433 THOMAS DRIVE  
124  
PANAMA CITY BEACH, FL 32401 US

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

PEASE, CLARA  
5 MIRACLE STRIP LOOP  
PANAMA CITY BEACH, FL 32417 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: CLARA PEASE

09/29/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: PEASE, CLARA  
Address: 2433 THOMAS DRIVE, #124  
City-St-Zip: PANAMA CITY BEACH, FL 32401 US

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: CLARA PEASE

PRES

09/29/2010

Electronic Signature of Signing Officer or Director

Date