

# 2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000035612

FILED  
Feb 18, 2005  
Secretary of State

Entity Name: CIRCULATION DEPARTMENT, INC.

## Current Principal Place of Business:

1101 SIMONTON STREET  
KEY WEST, FL 33040

## New Principal Place of Business:

## Current Mailing Address:

1101 SIMONTON STREET  
KEY WEST, FL 33040

## New Mailing Address:

819 PEACOCK PLAZA #560  
KEY WEST, FL 33040

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HERZOG, THEODORE W ESQ.  
3339 DONALD AVENUE  
KEY WEST, FL 33040 US

## Name and Address of New Registered Agent:

HERZOG, THEODORE W ESQ.  
819 PEACOCK PLAZA #560  
KEY WEST, FL 33040 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: THEODORE W HERZOG ESQ

02/18/2005

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: BOGOEFF, JAMES A SR.  
Address: 3339 DONALD AVENUE  
City-St-Zip: KEY WEST, FL 33040

Title: D ( ) Delete  
Name: BOGOEFF, DENISE  
Address: 3339 DONALD AVENUE  
City-St-Zip: KEY WEST, FL 33040

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: BOGOEFF, JAMES A SR.  
Address: 819 PEACOCK PLAZA #560  
City-St-Zip: KEY WEST, FL 33040

Title: D (X) Change ( ) Addition  
Name: BOGOEFF, DENISE  
Address: 819 PEACOCK PLAZA #560  
City-St-Zip: KEY WEST, FL 33040

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: JAMES A BOGOEFF SR

D

02/18/2005

Electronic Signature of Signing Officer or Director

Date