

# 2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000065735

FILED  
Oct 19, 2004  
Secretary of State

**Entity Name:** KRISTEN KOLDENHOVEN DESIGNS, INC.

**Current Principal Place of Business:**

174 WEST COMSTOCK AVENUE  
SUITE 114  
WINTER PARK, FL 32789

**New Principal Place of Business:**

4395 ST JOHN PARKWAY  
SANFORD, FL 32771

**Current Mailing Address:**

174 WEST COMSTOCK AVENUE  
SUITE 114  
WINTER PARK, FL 32789

**New Mailing Address:**

4395 ST JOHN PARKWAY  
SANFORD, FL 32771

**FEI Number:** 30-0180963

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KOLDENHOVEN, KRISTEN  
104 SPRING LAKE LANE  
ALTAMONTE SPRINGS, FL 32714 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: D ( ) Delete  
Name: KOLDENHOVEN, KRISTEN  
Address: 104 SPRING LAKE LANE  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: D ( ) Delete  
Name: KOLDENHOVEN, LINDA  
Address: 104 SPRING LAKE LANE  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

**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: KRISTEN KOLDENHOVEN

D

10/19/2004

Electronic Signature of Signing Officer or Director

Date