## 2005 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P03000067594

Entity Name: EXTRA DIRECT, INC.

Address: City-St-Zip:

BONITA SPRINGS, FL 34134

FILED Nov 09, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 27499 RIVERVIEW CENTER BLVD BONITA SPRINGS, FL 34134 **Current Mailing Address: New Mailing Address:** 27499 RIVERVIEW CENTER BLVD BONITA SPRINGS, FL 34134 FEI Number: 20-0051694 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: COHEN@GRIGSBY, PC 27200 RIVERVIEW CENTER BLVD BONITA SPRINGS, FL 34134 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: MARTIN MCGILL 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition MUNDAY, GIANNI Name: Name: 27499 RIVERVIEW CENTER BLVD Address: Address: City-St-Zip: BONITA SPRINGS, FL 34134 City-St-Zip: Title: Title: () Delete () Change () Addition Name: SMITH, BRADLEY R Name: 27499 RIVERVIEW CENTER BLVD Address: Address: BONITA SPRINGS, FL 34134 City-St-Zip: City-St-Zip: Title: Title: STD ( ) Delete () Change () Addition MUNDAY, JUDY Name: Name: 27499 RIVERVIEW CENTER BLVD Address:

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.

City-St-Zip:

SIGNATURE: MARTIN MCGILL MR 11/09/2005