2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000069494

FILED Nov 04, 2008 Secretary of State

Entity Name: S. PONTI, INC. **Current Principal Place of Business: New Principal Place of Business:** 2126 NO. HAMPTON CIRCLE 2051 DYAN WAY WINTER PARK, FL 32792 MAITLAND, FL 32751 **Current Mailing Address: New Mailing Address:** 2126 NO. HAMPTON CIRCLE 2051 DYAN WAY WINTER PARK, FL 32792 MAITLAND, FL 32751 FEI Number: 59-2824904 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: PONTI, SYLVIA C PONTI, SYLVIA C 2126 NO. HAMPTON CIRCLE 2051 DYAN WAY WINTER PARK, FL 32792 MAITLAND, FL 32751 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: SYLVIA C. PONTI 11/04/2008 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 (X) Change () Addition PONTI, SYLVIA C PONTI, SYLVIA C Name: Name: 2126 NO. HAMPTON CIRCLE Address: 2051 DYAN WAY Address: City-St-Zip: WINTER PARK, FL 32792 City-St-Zip: MAITLAND, FL 32751 Title: Title: () Delete () Change () Addition PONTI, DENISE A Name: Name: 2051 DYAN WAY Address: Address: MAITLAND, FL 32751 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition CAVANAUGH, TERENCE W Name: Name: 14017 FORTUNADO RD Address: Address: City-St-Zip: JACKSONVILLE, FL 32225 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: SYLVIA C. PONTI 11/04/2008 D