## 2008 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P03000110305

2385 BARNETTE RD.

CROSS HILL, SC 29332

Address:

City-St-Zip:

Entity Name: GREAT GAMES OF FLORIDA, INC.

FILED Oct 28, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 3544 SW ARMELLINI AVE 1118 25TH STREET UNIT 7 PALM CITY, FL 34990 WEST PALM BEACH, FL 33407 **Current Mailing Address: New Mailing Address:** 3544 SW ARMELLINI AVE 1118 25TH STREET UNIT 7 PALM CITY, FL 34990 WEST PALM BEACH, FL 33407 FEI Number: 20-0721963 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MIMS, RICK L JONES, PATRICE L 3544 SW ARMELLINI AVE 1118 25TH STREET UNIT 7 PALM CITY, FL 34990 US WEST PALM BEACH, FL 33407 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: PATRICE L. JONES 10/28/2008 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 () Change () Addition MAYES, CHANDLER E Name: Name: 1443 STONE CANYON DRIVE Address: Address: City-St-Zip: SUGARLAND, TX 77479 City-St-Zip: ( ) Delete Title: Title: () Change () Addition Name: RANA, NADEEM Name: 210 STATION WAY Address: Address: ADAIRSVILLE, GA 30103 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition AGNEW, EDGAR H III Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: PATRICE L. JONES COO 10/28/2008