

# 2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000111665

Entity Name: 3678 CORPORATION, INC.

FILED  
Oct 20, 2004  
Secretary of State

## Current Principal Place of Business:

4629 DILLWYN DRIVE  
LAKELAND, FL 33813

## New Principal Place of Business:

3678 HARDEN BLVD  
LAKELAND, FL 33803

## Current Mailing Address:

4629 DILLWYN DRIVE  
LAKELAND, FL 33813

## New Mailing Address:

FEI Number: 41-2112494

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ARTMAN, STEPHEN H ESQ.  
925 SOUTH FLORIDA AVENUE  
LAKELAND, FL 33803 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: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES ( ) Change (X) Addition  
Name: ROCKHOLD, ROBIN J PRESI  
Address: 4629 DILLWYN DRIVE  
City-St-Zip: LAKELAND, FL 33813

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: ROBIN ROCKHOLD

PRES

10/20/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date