## 2005 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P03000127799

Entity Name: ROB RILEY INSURANCE AGENCY, INC.

FILED Oct 07, 2005 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	OWERLINE RE D BEACH, FL				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	OWERLINE RED BEACH, FL				
FEI Number:	20-0386440	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of C	urrent Registered Agent:	Name and Address o	Name and Address of New Registered Agent:	
1323 LYON		ROLLED AGENT, ACCOUNT 33063 US	FANT		
	named entity s e of Florida.	submits this statement for the	e purpose of changing its registere	d office or registered agent, or both,	
SIGNATUR	RE: ROBRILI	ΞΥ			
	Electror	ic Signature of Registered A	gent	Date	
		3(2)(b), F.S., the corporation did Trust Fund Contribution ( ).	not receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D ( ) RILEY, ROB 1416 S. POWE POMPANO BEA		Title: Name: Address: City-St-Zip:	() Change () Addition	

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: ROB RILEY PRES 10/07/2005