

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000139919

FILED  
Mar 06, 2009  
Secretary of State

Entity Name: JAMES C. FETTERMAN CHARTERED

## Current Principal Place of Business:

4521 BEE RIDGE ROAD #A  
SARASOTA, FL 34233

## New Principal Place of Business:

1716 INDEPENDENCE BLVD  
SUITE A  
SARASOTA, FL 34234 21

## Current Mailing Address:

4521 BEE RIDGE ROAD #A  
SARASOTA, FL 34233

## New Mailing Address:

4525 PARNELL DRIVE  
SUITE A  
SARASOTA, FL 34232

FEI Number: 20-0495062

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FETTERMAN, JAMES C  
4521 BEE RIDGE ROAD #A  
SARASOTA, FL 34233 US

## Name and Address of New Registered Agent:

FETTERMAN, JAMES C  
4525 PARNELL DRIVE  
SARASOTA, FL 34232 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: JAMES C FETTERMAN

03/06/2009

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: D ( ) Delete  
Name: FETTERMAN, JAMES C  
Address: 4525 PARNELL DRIVE  
City-St-Zip: SARASOTA, FL 34232

Title: P ( ) Delete  
Name: FETTERMAN, JAMES C  
Address: 4525 PARNELL DRIVE  
City-St-Zip: SARASOTA, FL 34232

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: JAMES C FETTERMAN

P/D

03/06/2009

Electronic Signature of Signing Officer or Director

Date