

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000038081

FILED
Sep 30, 2008
Secretary of State

Entity Name: FRAMES AND ASSOCIATES, INC.

Current Principal Place of Business:

8087 SUN VALLEY DR
JACKSONVILLE, FL 32210

New Principal Place of Business:

Current Mailing Address:

PO BOX 442017
JACKSONVILLE, FL 32222

New Mailing Address:

FEI Number: 03-0512600

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, MARY A
8087 SUN VALLEY DR
JACKSONVILLE, FL 32210 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: MARY WILLIAMS

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: P () Delete
Name: WILLIAMS, MARY A
Address: PO BOX 442017
City-St-Zip: JACKSONVILLE, FL 32222

Title: VP () Delete
Name: WILLIAMS, SAKINA B
Address: 5409 MINOSA COURT
City-St-Zip: JACKSONVILLE, FL 32209

Title: S () Delete
Name: RIVERS, CLAUSELL
Address: 3998 HATCHING COURT
City-St-Zip: JACKSONVILLE, FL 32210

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: MARY WILLIAMS

P

09/30/2008

Electronic Signature of Signing Officer or Director

Date