

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000040653

Entity Name: ADAM ROBINSON INC

FILED
Feb 20, 2006
Secretary of State

Current Principal Place of Business:

575 TIMBERLAKE DRIVE
MARY ESTHER, FL 32569 US

New Principal Place of Business:

Current Mailing Address:

575 TIMBERLAKE DRIVE
MARY ESTHER, FL 32569 US

New Mailing Address:

FEI Number: 20-0814756

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBINSON, ADAM
575 TIMBERLAKE DRIVE
MARY ESTHER, FL 32569 US

Name and Address of New Registered Agent:

STECKLEIN, MONIQUE
367 OSBORNE DR NE
FORT WALTON BEACH, FL 32548 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: MONIQUE STECKLEIN

02/20/2006

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: ROBINSON, ADAM
Address: 575 TIMBERLAKE DRIVE
City-St-Zip: MARY ESTHER, FL 32569 US

Title: VP () Delete
Name: LAU, THOMAS K
Address: 575 TIMBERLAKE DRIVE
City-St-Zip: MARY ESTHER, FL 32569 US

Title: VP () Delete
Name: WILHELM, CLIFFORD
Address: 575 TIMBERLAKE DRIVE
City-St-Zip: MARY ESTHER, FL 32569

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: CROWELL, GABRION
Address: 575 TIMBERLAKE DRIVE
City-St-Zip: MARY ESTHER, FL 32569 US

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

I hereby certify that the information supplied with this filing does not qualify for the 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: ADAM ROBINSON

P

02/20/2006

Electronic Signature of Signing Officer or Director

Date