

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000074805

FILED
Nov 15, 2009
Secretary of State

Entity Name: FLORIDA OWNERS DIRECT, INC.

Current Principal Place of Business:

220 SUNSET COURT
DAVENPORT, FL 33837 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 82
LOUGHMAN, FL 33358 US

New Mailing Address:

FEI Number: 20-1711645

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GILBERT, ELIZABETH
220 SUNSET COURT
DAVENPORT, FL 33837 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: ELIZABETH GILBERT

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: PRES () Delete
Name: GILBERT, ELIZABETH
Address: THE OLD BAKERY GOLDEN SQUARE
City-St-Zip: PETWORTH, SUSSEX, UK GU28 0XP UK

Title: D () Delete
Name: LENNARD, PAUL
Address: 220 SUNSET COURT
City-St-Zip: DAVENPORT, FL 33837

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: PAUL LENNARD

D

11/15/2009

Electronic Signature of Signing Officer or Director

Date