

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000083394

Entity Name: DIGITAL THREE INC.

FILED
Feb 05, 2007
Secretary of State

Current Principal Place of Business:

1419 BLVD OF THE ARTS
SARASOTA, FL 34236

New Principal Place of Business:

Current Mailing Address:

1419 BLVD OF THE ARTS
SARASOTA, FL 34236

New Mailing Address:

FEI Number: 20-1166958

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLEMAN, STEVEN W
350 HERONS RUN DR
506
SARASOTA, FL 34232 US

Name and Address of New Registered Agent:

BURCH, NICK
1419 BLVD. OF THE ARTS
SARASOTA, FL 34236 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: NICK BURCH

02/05/2007

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: S () Delete
Name: BURCH, NICK A
Address: 2224 BAHIA VISTA #E5
City-St-Zip: SARASOTA, FL 34239

Title: VP () Delete
Name: CROSS, KYLE A
Address: 4839 HABANNA DR
City-St-Zip: SARASOTA, FL 34235

Title: TREA () Delete
Name: COLEMAN, STEVEN W
Address: 350 HERONS RUN DR #506
City-St-Zip: SARASOTA, FL 34232

Title: P () Delete
Name: BURCH, PAUL E
Address: 1891 BOYCE ST
City-St-Zip: SARASOTA, FL 34239

Title: CHAI () Delete
Name: MCDERMOTT, BARBARA
Address: 900 LEMON BAY DR.
City-St-Zip: VENICE, FL 34293

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: BURCH, NICK A
Address: 1650 NAPOLI DR W
City-St-Zip: SARASOTA, FL 34232

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

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 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: NICK BURCH

S

02/05/2007

Electronic Signature of Signing Officer or Director

Date