


2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P04000086174		
1. Entity Name TREEMAN CORPORATION		

FILED
05 DEC -2 PM 2:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business 15 CROSSROADS SUITE 251 SARASOTA, FL 34239	Mailing Address 15 CROSSROADS SUITE 251 SARASOTA, FL 34239
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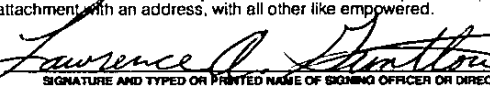
2. Principal Place of Business 15 Paradise Plaza Suite, Apt. #, etc. Suite 251 City & State Sarasota, Fl Zip 34239	Country USA	3. Mailing Address 15 Paradise Plaza Suite, Apt. #, etc. Suite 251 City & State Sarasota, Fl Zip 34239	Country USA
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6. Name and Address of Current Registered Agent MYERS, JOHN H 2831 RINGLING BLVD SUITE B-107 SARASOTA, FL 34237	
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7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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8. 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. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE 	DATE 11/22/05

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.	
SIGNATURE 	DATE 10/25/05 941-400-9129

B. Mitchell DEC 2 2005