

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000097248

FILED  
Aug 21, 2006  
Secretary of State

Entity Name: TASK MASTERS OF JACKSONVILLE INCORPORATED

**Current Principal Place of Business:**

4083 SUNBEAM ROAD  
1716  
JACKSONVILLE, FL 32257

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 56042  
JACKSONVILLE, FL 32241

**New Mailing Address:**

2177 WEST 40TH STREET  
JACKSONVILLE, FL 32209

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

STRIGLER, FELICE D  
4083 SUNBEAM ROAD  
1716  
JACKSONVILLE, FL 32257 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: FELICE D STRIGLER

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: STRIGLER, COREY C  
Address: 4083 SUNBEAM ROAD  
City-St-Zip: JACKSONVILLE, FL 32257

Title: VP ( ) Delete  
Name: STRIGLER, FELICE D  
Address: 4083 SUNBEAM ROAD  
City-St-Zip: JACKSONVILLE, FL 32257

Title: SEC. ( ) Delete  
Name: STRIGLER, FELICE D  
Address: 4083 SUNBEAM ROAD  
City-St-Zip: JACKSONVILLE, FL 32257

Title: TRES ( ) Delete  
Name: STRIGLER, COREY C  
Address: 4083 SUNBEAM ROAD  
City-St-Zip: JACKSONVILLE, FL 32257

**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:

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: COREY STRIGLER

P

08/21/2006

Electronic Signature of Signing Officer or Director

Date