

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000112796

Entity Name: CTP ENERGY CORPORATION

FILED
Apr 29, 2008
Secretary of State

Current Principal Place of Business:

5740 SOUTH SEMORAN BLVD
ORLANDO, FL 32822 US

New Principal Place of Business:

6125 S. SEMORAN BLVD.
STE 104
ORLANDO, FL 32822 US

Current Mailing Address:

5740 SOUTH SEMORAN BLVD
ORLANDO, FL 32822 US

New Mailing Address:

6125 S. SEMORAN BLVD.
STE 104
ORLANDO, FL 32822 US

FEI Number: 54-2159869

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ORSWELL, ROBERT N
5740 SOUTH SEMORAN BLVD
ORLANDO, FL 32822 US

Name and Address of New Registered Agent:

PREMATE, DRAZEN E
6125 S. SEMORAN BLVD
STE 104
ORLANDO, FL 32822 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: DRAZEN E PREMATE

04/29/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PREMATE, DRAZEN E
Address: 5740 SOUTH SEMORAN BLVD
City-St-Zip: ORLANDO, FL 32822 US

Title: VPSD () Delete
Name: ORSWELL, ROBERT N
Address: 5740 SOUTH SEMORAN BLVD
City-St-Zip: ORLANDO, FL 32822 US

Title: VPD () Delete
Name: STAFFORD, GARY E
Address: 5740 SOUTH SEMORAN BLVD
City-St-Zip: ORLANDO, FL 32822 US

Title: T (X) Delete
Name: WINSCHER, MARGARET M
Address: 5740 SOUTH SEMORAN BLVD
City-St-Zip: ORLANDO, FL 32822 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: PREMATE, DRAZEN E
Address: 6125 S. SEMORAN BLVD. STE 104
City-St-Zip: ORLANDO, FL 32822 US

Title: VPSD (X) Change () Addition
Name: ALFRED, TRAUTMAN III
Address: 6125 S. SEMORAN BLVD. STE 104
City-St-Zip: ORLANDO, FL 32822 US

Title: VPD (X) Change () Addition
Name: STAFFORD, GARY E
Address: 6125 S. SEMORAN BLVD. STE 104
City-St-Zip: ORLANDO, FL 32822 US

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: DRAZEN E PREMATE

P

04/29/2008

Electronic Signature of Signing Officer or Director

Date