## 2008 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P04000125378

FILED Dec 04, 2008 Secretary of State

Entity Nar	me: CITRUS	COAST CONCIERGE INC.					
Current Principal Place of Business:			New Princ	New Principal Place of Business:			
1100 MICH NAPLES, F	HIGAN AVE FL 34103						
Current Mailing Address:			New Maili	New Mailing Address:			
P.O. BOX NAPLES, F	770102 FL 341070102						
FEI Number: 61-1475829 FEI Number Applied For ( )			FEI Number Not App	lumber Not Applicable ( ) Certificate of Status Desired (X)			
Name and	Address of C	Current Registered Agent:	Name and	Name and Address of New Registered Agent:			
	TOCKMAN L F SHIRE LAKES FL 34109 L						
	named entity : e of Florida.	submits this statement for the p	urpose of changing	its registered o	office or registe	ered agent, or both,	
SIGNATUR	RE: JAMES L	. STOCKMAN					
	Electror	nic Signature of Registered Age	nt		Date		
Election Car		3(2)(b), F.S., the corporation did not g Trust Fund Contribution(). TORS:	-		TO OFFICER	S AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	` '		Title: Name: Address: City-St-Zip:	(	) Change ()Add	ition	
Title: Name: Address: City-St-Zip:	( )	Delete	Title: Name: Address: City-St-Zip:	JAMES, STOC	RE LAKES BLVD	lition	
Title: Name: Address: City-St-Zip:	( )	Delete	Title: Name: Address: Citv-St-Zip:	MS. ( KAY, NICHOLS 1100 MICHIGA NAPLES. FL 3	N AVE	lition	

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: ELIZABETH CAMPBELL **PRES** 12/04/2008