

# 2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000139239

Entity Name: BO-KEY INC.

FILED  
Sep 26, 2005  
Secretary of State

## Current Principal Place of Business:

1703 WEST 2ND STREET  
SANFORD, FL 32771

## New Principal Place of Business:

## Current Mailing Address:

1703 WEST 2ND STREET  
SANFORD, FL 32771

## New Mailing Address:

FEI Number: 34-2025156

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MORGAN, SERITA  
1703 WEST 2ND STREET  
SANFORD, FL 32771 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: SERITA MORGAN

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: D ( ) Delete  
Name: SMITH, VICTORIA  
Address: 1811 HARDING AVE  
City-St-Zip: SANFORD, FL 32771

Title: D ( ) Delete  
Name: THOMAS, ROBERT B  
Address: 129 BOB THOMAS CIRCLE  
City-St-Zip: SANFORD, FL 327735212

Title: P ( ) Delete  
Name: MORGAN, BONNYE  
Address: 1703 WEST 2ND STREET  
City-St-Zip: SANFORD, FL 32771

Title: V ( ) Delete  
Name: BROWN, DON  
Address: 3521 STATE RD 46 EAST  
City-St-Zip: SANFORD, FL 32771

Title: T ( ) Delete  
Name: MORGAN, SERITA  
Address: 1703 WEST 2ND STREET  
City-St-Zip: SANFORD, FL 32771

Title: S ( ) Delete  
Name: MORGAN, SERITA  
Address: 1703 WEST 2ND STREET  
City-St-Zip: SANFORD, FL 32771

## 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:

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 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 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: DON L. BROWN

VP

09/26/2005

Electronic Signature of Signing Officer or Director

Date