## 2008 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P04000145206

Entity Name: ZOELLER ENTERPRISES, INC.

FILED Jan 23, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5018 N FEDERAL HWY LIGHTHOUSE POINT, FL 33064

Current Mailing Address: New Mailing Address:

5018 N FEDERAL HWY LIGHTHOUSE POINT, FL 33064

FEI Number: 20-1781527 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

ZOELLER, BRIAN K
2340 NE 51 ST
LIGHTHOUSE POINT, FL 33064
US
ZOELLER, BRIAN K
2750 NE 28TH CT
3

LIGHTHOUSE POINT, FL 33064 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: BRIAN KEITH ZOELLER 01/23/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

LIGHTHOUSE POINT, FL 33064

## **OFFICERS AND DIRECTORS:**

City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: P (X) Change ( ) Addition

 Name:
 ZOELLER, BRIAN K
 Name:
 ZOELLER, BRIAN K

 Address:
 2340 NE 51 ST
 Address:
 2750 NE 28TH CT

City-St-Zip: LIGHTHOUSE POINT, FL 33064 City-St-Zip: LIGHTHOUSE POINT, FL 33064

Title: VP (X) Delete Title: ( ) Change ( ) Addition

 Name:
 ZOELLER, CATHERINE E
 Name:

 Address:
 2340 NE 51 ST
 Address:

 City-St-Zip:
 LIGHTHOUSE POINT, FL 33064
 City-St-Zip:

Title: SEC (X) Delete Title: ( ) Change ( ) Addition

Name: SCHEARER, NORMAN Name:
Address: 5010 NE 23 TERR Address:

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.

City-St-Zip:

SIGNATURE: BRIAN KEITH ZOELLER P 01/23/2008