## 2006 FOR PROFIT CORPORATION

REINSTATEMENT				
1. Entity Nam	MENT # P04000 CAMPUS, INC.	1150474 🕟 .		FILED
Principal Plac 9269 PARK I SEMINOLE, F	BLVD.	Mailing Address 1800 9TH AVE N ST PETERSBURG, FL 3	33713 US	2006 OCT 18 PM 12: 53  SECRETARY OF STATE TALLAHASSEE. FLORID
2. Principal Place of Business		3. Mailing Address		
Suite, Apt. #, etc.		Suite, Apt. #, etc.	11-11-1	10052006 REIN-P CR2E098 (11/05)
City & State		City & State		4. FEI Number Applied For 20-2010478 Not Applied be
Zip	Country	Zip	Country	5. Certificate of Status Desired See Required
8. The above named entity submits this glatement for the purpose of changing its registered the obligations of registered agent.				
SIGNATURE COO 10-16-06 Signature, typod or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)  DATE				
FILE NOW!!! FEE IS \$750.00 After January 1, 2007, Fee will be \$900.00				
10.	OFFICER	S AND DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D — COMERFORD, MARGARE 13196 93RD AVE. NORTH SEMINOLE, FL 33776		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition ☐ Change ☐ Chang
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP ST	DHN UIS OO 9th Are N Petersbing FL. 33713
TITLE NAME STREET ADDRESS CITY+ST-ZIP		☐ Delete	NAME DU L'EN CITY-ST-ZIP ST.	Petersburg, FL. 33713  -2  CHARD Guillot  Change Raddition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STHEET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY+ST-ZIP		☐ Delete	TITLE NAME STHEET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
12. Thereby o	ertily that the information suppl	ied with this filing does not qualify fo	or the exemptions contained	ed in Chapter 119, Florida Statutes. I lurther certify that the information

indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an office 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

10-5-06 727-280-0375 Date Daylime Phone \* 1021