

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P05000028735 1. Entity Name LAW OFFICE OF EDWARD MCBRIDE CORPORATION					
Principal Place of Business 2310 FIRST ST STE 306 FT MYERS, FL 33901				Mailing Address 2310 FIRST ST STE 306 FT MYERS, FL 33901	
2. Principal Place of Business 2029 CLIFFORD ST		3. Mailing Address P.O. BOX 2447			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 			
City & State FORT MYERS		City & State FORT MYERS, FL		4. FEI Number 65-1076612	
Zip 33901		Country LEE		Zip 33902	
Country LEE		Country LEE		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required				10172008 REIN-P CR2E098 (11/06)	
6. Name and Address of Current Registered Agent GAINES, JEAN 2310 FIRST ST STE 306 FT MYERS, FL 33901				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<div style="display: flex; justify-content: space-between;"> <div> FILE NOW!!! FEE IS \$750.00 After January 1, 2007, Fee will be \$900.00 </div> <div>DATE _____</div> </div>					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P MCBRIDE, EDWARD 2310 FIRST ST STE 306 FT MYERS, FL 33901	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2029 CLIFFORD ST FORT MYERS, FL 33901	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V MCBRIDE, CINDY 2310 FIRST ST STE 306 FT MYERS, FL 33901	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2029 CLIFFORD ST FORT MYERS, FL 33901	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST GAINES, JEAN 2310 FIRST ST STE 306 FT MYERS, FL 33901	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2029 CLIFFORD ST FORT MYERS, FL 33901	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 600081894526 11/17/06--01010--002 **150.00	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 600081894526 11/17/06--01010--003 **8.75	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Cindy Mc Bride V.P.</u> 10/27/06 239-418-1919 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					

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EDWARD MCBRIDE
ATTORNEY AND COUNSELOR AT LAW
2029 Clifford Street
Fort Myers, FL 33901

Mailing Address:

PO Box 2447
Fort Myers, FL 33902

Facsimile (239) 226-4374
Telephone (239) 418-1919

October 27, 2006

Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Reference: Law office of Edward McBride Corporation
Document #P05000028735
Reinstatement

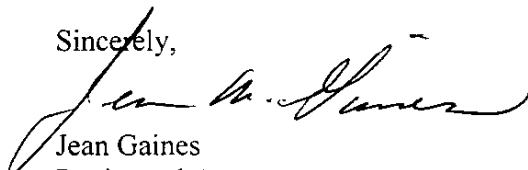
The office of Edward McBride located at 2310 First Street, Fort Myers, FL did not received any prior notices or annual reports for the year of 2006 and would appreciate if the reinstatement fee of \$750.00 would be waived .

Our new office, located at 2029 Clifford St., Fort Myers, FL 33901, should be a better location for receiving mail. The forms enclosed were printed off of the computer internet.

I have enclose forms and a check in the amount of \$150.00 as requested by Tyrone Scott with Division of Corporations.

The above request would be greatly appreciated.

Sincerely,


Jean Gaines
Registered Agent