2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000041142

Entity Name: T.G.P.I., INC.

FILED Oct 05, 2006 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

PO BOX 1480 25 EAST CASA LOMA DRIVE FT WALTON BEACH, FL 32548 US MARY ESTHER, FL 32569 US

Current Mailing Address: New Mailing Address:

25 EAST CASA LOMA DRIVE PO BOX 1480 FT WALTON BEACH, FL 32548 US MARY ESTHER, FL 32569 US

FEI Number: 01-0831182 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

CORPORATION SERVICE COMPANY TROTTER, SHERRY A 25 EAST CASA LOMA DRIVE 1201 HAYS STREET TALLAHASSEE, FL 32301 US MARY ESTHER, FL 32569

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: SHERRY A. TROTTER 10/05/2006

> 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 (). ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

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

TROTTER, SHERRY TROTTER, SHERRY Name: Name:

PO BOX 1480 25 EAST CASA LOMA DRIVE Address: Address: City-St-Zip: FT WALTON BEACH, FL 32548 US City-St-Zip: MARY ESTHER, FL 32569 US

Title: Title: (X) Change () Addition () Delete Name: TROTTER, NICK Name: TROTTER, NICK

PO BOX 1480 25 EAST CASA LOMA DRIVE Address: Address: FT WALTON BEACH, FL 32548 US MARY ESTHER, FL 32569 US City-St-Zip: City-St-Zip:

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

TROTTER, ANGELA M Name: TROTTER, ANGELA M Name: PO BOX 1480 25 EAST CASA LOMA DRIVE Address: Address: City-St-Zip: FT WALTON BEACH, FL 32548 City-St-Zip: MARY ESTHER, FL 32569

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutés. 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.

Ρ SIGNATURE: SHERRY A TROTTER 10/05/2006