

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000080088

FILED
Oct 04, 2007
Secretary of State

Entity Name: RPC REALTY, INC.

Current Principal Place of Business:

1835 HEALTH CARE DRIVE
TRINITY, FL 34655

New Principal Place of Business:

Current Mailing Address:

1835 HEALTH CARE DRIVE
TRINITY, FL 34655

New Mailing Address:

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

Name and Address of Current Registered Agent:

WOLLINKA, DAVID J
2312 U.S. HIGHWAY 19
HOLIDAY, FL 34691 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: DAVID J. WOLLINKA

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: P () Delete
Name: CARDENAS, ROBIN P
Address: 6328 SPOONBILL DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: VP () Delete
Name: CARDENAS, ROBIN P
Address: 6328 SPOONBILL DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: S () Delete
Name: CARDENAS, ROBIN P
Address: 6328 SPOONBILL DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: T () Delete
Name: CARDENAS, ROBIN P
Address: 6328 SPOONBILL DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34652

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CARDENAS, ROBIN P
Address: 138 KENNEDY ROAD
City-St-Zip: EDDYVILLE, KY 42038

Title: VP (X) Change () Addition
Name: CARDENAS, ROBIN P
Address: 138 KENNEDY ROAD
City-St-Zip: EDDYVILLE, KY 42038

Title: S (X) Change () Addition
Name: CARDENAS, ROBIN P
Address: 138 KENNEDY ROAD
City-St-Zip: EDDYVILLE, KY 42038

Title: T (X) Change () Addition
Name: CARDENAS, ROBIN P
Address: 138 KENNEDY ROAD
City-St-Zip: EDDYVILLE, KY 42038

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.

SIGNATURE: ROBIN CARDENAS

Electronic Signature of Signing Officer or Director

PRES

10/04/2007

Date