

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000107978

**FILED**  
**Oct 12, 2009**  
**Secretary of State**

**Entity Name:** THOMAS RAULERSON MD AND FARM, INC.

**Current Principal Place of Business:**

3336 NW 142ND AVE.  
GAINESVILLE, FL 32609

**New Principal Place of Business:**

3336 NW 142 AVE  
GAINESVILLE, FL 32609

**Current Mailing Address:**

3336 NW 142ND AVE.  
GAINESVILLE, FL 32609

**New Mailing Address:**

3336 NW 142 AVE  
GAINESVILLE, FL 32609

**FEI Number:** 04-3823088

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RAULERSON, THOMAS  
3336 NW 142ND AVE.  
GAINESVILLE, FL 32609 US

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

RAULERSON, THOMAS  
3336 NW 142 AVE  
GAINESVILLE, FL 32609 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: THOMAS RAULERSON

10/12/2009

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: PTD ( ) Delete  
Name: RAULERSON, THOMAS  
Address: 3336 NW 142ND AVE.  
City-St-Zip: GAINESVILLE, FL 32609

Title: VSD ( ) Delete  
Name: RAULERSON, DEBORAH  
Address: 3336 NW 142ND AVE.  
City-St-Zip: GAINESVILLE, FL 32609

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PTD (X) Change ( ) Addition  
Name: RAULERSON, THOMAS  
Address: 3336 NW 142 AVE  
City-St-Zip: GAINESVILLE, FL 32609

Title: VSD (X) Change ( ) Addition  
Name: RAULERSON, DEBORAH  
Address: 3336 NW 142 AVE  
City-St-Zip: GAINESVILLE, FL 32609

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: THOMAS RAULERSON

PTD

10/12/2009

Electronic Signature of Signing Officer or Director

Date