## 2008 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P05000139594

Entity Name: TIGRIN INC.

FILED Oct 09, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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6041 AUDUBON DR

PENSACOLA, FL 32504 US

Current Mailing Address: New Mailing Address:

6041 AUDUBON DR P.O. BOX 20023

PENSACOLA, FL 32504 US PENSACOLA, FL 32524

FEI Number: 03-0571637 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

MILLER, LINDA E STOUFFER, REX D
6041 AUDUBON DR 6041 AUDUBON DR

PENSACOLA, FL 32504 US PENSACOLA, FL 32504 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: REX D STOUFFER 10/09/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 GRINER, JEFFERY D
 Name:
 GRINER, JEFFERY D

 Address:
 5892 AUDUBON DR APT #A2
 Address:
 6041 AUDUBON DR

 City-St-Zip:
 PENSACOLA, FL 32504 US
 City-St-Zip:
 PENSACOLA, FL 32504 US

Title: VP ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 STOUFFER, REX D
 Name:

 Address:
 6041 AUDUBON DR
 Address:

 City-St-Zip:
 PENSACOLA, FL 32504 US
 City-St-Zip:

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

 Name:
 ORTIZ, JARED M
 Name:

 Address:
 2275 SCENIC HWY
 Address:

 City-St-Zip:
 PENSACOLA, FL 32504 US
 City-St-Zip:

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: REX D. STOUFFER VP 10/09/2008