2014 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 04, 2014
Secretary of State

DOCUMENT# P05000142740

Entity Name: HENRY THORPE & ASSOCIATES, INC.

Current Principal Place of Business:

5109 BROKEN SOUND LANE
VALRICO, FL 33596

New Principal Place of Business:

5109 BROKEN SOUND LANE
VALRICO, FL 33596 UN

Current Mailing Address:

5109 BROKEN SOUND LANE
VALRICO, FL 33596

New Mailing Address:

5109 BROKEN SOUND LANE
VALRICO, FL 33596 UN

FEI Number: 20-3682905 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

THORPE, HENRY L JR.
5109 BROKEN SOUND LANE
VALRICO, FL 33596 US

Name and Address of New Registered Agent:

THORPE, JR, HENRY L P
5109 BROKEN SOUND LANE
VALRICO, FL 33596 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: HENRY L THORPE, JR. 10/04/2014
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P
Name: THORPE, HENRY L JR
Address: 5109 BROKEN SOUND LANE
City-St-Zip: VALRICO, FL 33596 UN

Title: VP
Name: THORPE, DOIRS S
Address: 2217 MALIBU DRIVE
City-St-Zip: BRANDON, FL 33511

Title: S
Name: THORPE, KATHLEEN E
Address: 5109 BROKEN SOUND LANE
City-St-Zip: VALRICO, FL 33596

Title: T
Name: THORPE, HENRY L JR.
Address: 5109 BROKEN SOUND LANE
City-St-Zip: VALRICO, FL 33594

I hereby 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 all other like empowered.

SIGNATURE: HENRY L. THORPE, JR. P 10/04/2014
Electronic Signature of Signing Officer or Director Date