## 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000027319

Entity Name: DEBORAH L. CEDERQUIST, PA

**FILED** Dec 24, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

911 GULF BREEZE PKWY 836 GULF BREEZE PKWY GULF BREEZE, FL 32561 US GULF BREEZE, FL 32561 US

**Current Mailing Address: New Mailing Address:** 

P.O. BOX 1212 GULF BREEZE, FL 32562

FEI Number: 20-4416048 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:

HICKEY, RAYMOND G 913 GULF BREEZE PKWY SUITE 5 GULF BREEZE, FL 32561 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: RAYMOND G HICKEY

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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

CEDERQUIST, DEBORAH L CEDERQUIST, DEBORAH L Name: Name: PO BOX 1212

PO BOX 1212 Address: Address:

City-St-Zip: GULF BREEZE, FL 32561 US City-St-Zip: GULF BREEZE, FL 32562 US

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.

Ρ SIGNATURE: DEBORAH L CEDERQUIST 12/24/2008