# 2010 FOR PROFIT CORPORATION REINSTATEMENT

**FILED**
**May 18, 2010**
**Secretary of State**

DOCUMENT# P06000029205

**Entity Name:** BARBARA J. PRASSE, P.A.

**Current Principal Place of Business:**

420 WEST PLATT STREET
TAMPA, FL 33606

**New Principal Place of Business:**

1300 EAST 8TH AVENUE
TAMPA, FL 33605

**Current Mailing Address:**

420 WEST PLATT STREET
TAMPA, FL 33606

**New Mailing Address:**

P.O. BOX 173497
TAMPA, FL 33672

**FEI Number: 20-4406340** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

PRASSE, BARBARA J ESQ.
420 WEST PLATT STREET
TAMPA, FL 33606 US

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

PRASSE, BARBARA J ESQ.
1300 EAST 8TH AVENUE
TAMPA, FL 33605 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: BARBARA J. PRASSE 05/18/2010
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
Name: PRASSE, BARBARA J
Address: PO BOX 173497
City-St-Zip: TAMPA, FL 33672

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: BARBARA J. PRASSE MMBR 05/18/2010
Electronic Signature of Signing Officer or Director Date