## 2009 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P06000051892

**Entity Name: MAINDOME PROCESSING CORPORATION** 

FILED Oct 29, 2009 Secretary of State

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

961 FULTON WAY 91 WILLOW WOOD CIRCLE SEBASTIAN, FL 32958 US ATLANTA, GA 30317 US

Current Mailing Address: New Mailing Address:

6469 SUMMIT POINT 91 WILLOW WOOD CIRCLE SUITE E ATLANTA, GA 30317 US NORCROSS, GA 30092 US

FEI Number: 57-1233739 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:

ROSS, LESLIE 961 FULTON WAY SEBASTIAN, FL 32958 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: LESLIE ROSS

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

Name: ROSS, LESLIE Name: ROSS, LESLIE

Address: SUITE 196, 9611 N. US HIGHWAY 1, B2 Address: 91 WILLOW WOOD CIRCLE City-St-Zip: SEBASTIAN, FL 32958 US City-St-Zip: ATLANTA, GA 30317 US

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

Name: ROSS, LESLIE Name: ROSS, LESLIE

 Address:
 961 FULTON WAY
 Address:
 91 WILLOW WOOD CIRCLE

 City-St-Zip:
 SEBASTIAN, FL 32958 US
 City-St-Zip:
 ATLANTA, GA 30317 US

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

Name: ROSS, LESLIE Name: ROSS, LESLIE

Address: 961 FULTON WAY Address: 91 WILLOW WOOD CIRCLE
City-St-Zip: SEBASTIAN, FL 32958 FL City-St-Zip: ATLANTA, GA 30317 GA

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: LESLIE ROSS P 10/29/2009