


2007 FOR PROFIT CORPORATION REINSTATEMENT

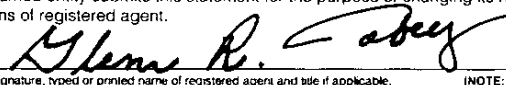
DOCUMENT # P06000059805		
1. Entity Name TOBEY & ASSOCIATES, INC.		

Principal Place of Business 8767 THE ESPLANADE, SUITE 33 ORLANDO, FL 32836-8781	Mailing Address 8767 THE ESPLANADE, SUITE 33 ORLANDO, FL 32836-8781
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2. Principal Place of Business - No P.O. Box # 9726 CAMBERLY CIRCLE	3. Mailing Address SAME
Suite, Apt. #, etc.	Suite, Apt. #, etc.

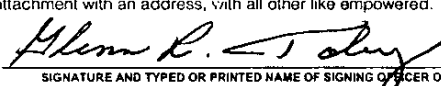
City & State ORLANDO, FL	City & State
Zip 32836	Country USA

6. Name and Address of Current Registered Agent TOBEY, GLENN R 8767 THE ESPLANADE, SUITE 33 9726 CAMBERLY CIRCLE ORLANDO, FL 32836-8781	
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7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE: 	DATE: 9/2/07

FILE NOW!!! FEE IS \$150.00 After January 1, 2008, Fee will be \$300.00	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TOBEY, GLENN R 8767 THE ESPLANADE, SUITE 33 ORLANDO, FL 328368781	TITLE NAME STREET ADDRESS CITY-ST-ZIP	200110497702 10/09/07--01050--025 **150.00
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.	
SIGNATURE: 	DATE: 9/2/07

FILED
07 OCT -8 AM 11:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



10022 REINSTATEMENT (1/07) 07