

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000082877

FILED  
Feb 27, 2008  
Secretary of State

Entity Name: ROBIN ROAD OFFICE OWNER ASSOCIATION INC

**Current Principal Place of Business:**

604 ROBIN ROAD  
LAKELAND, FL 32803

**New Principal Place of Business:**

**Current Mailing Address:**

13625 N FLORIDA AVE  
TAMPA, FL 33613

**New Mailing Address:**

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

RAIRIGH, RAYMOND SR  
13625 N. FLORIDA AVE  
TAMPA, FL 33613 US

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

CEL REGISTERED AGENTS, LLC  
2601 S BAYSHORE DRIVE  
SUITE #700  
COCONUT GROVE, FL 33133 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: SANTIAGO ELJAEK, MANAGER

02/27/2008

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 ( ) Delete  
Name: RAIRIGH, RAY SR  
Address: 13625 N. FLORIDA AVE  
City-St-Zip: TAMPA, FL 33613

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: RAY RAIRIGH

P

02/27/2008

Electronic Signature of Signing Officer or Director

Date