## 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000099984

Entity Name: GENTRY FINANCIAL, INC.

FILED Sep 30, 2008 Secretary of State

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

2800 W. CYPRESS CREEK RD. 351 N. CONGRESS AVE.

FORT LAUDERDALE, FL 33309 US SUITE 288

BOYNTON BEACH, FL 33426 US

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

351 N. CONGRESS AVE. SUITE 288 2800 W. CYPRESS CREEK RD

FORT LAUDERDALE, FL 33309 US

BOYNTON BEACH, FL 33426 US

FEI Number: 32-0262521 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:

LAW OFFICES OF LAWRENCE E. BLACKE, P.A. SCHULZ, TIMOTHY W P.A.

777 SOUTH FLAGLER DRIVE 3326 NE 33RD STREET SUITE 300 EAST

FORT LAUDERDALE, FL 33308 US WEST PALM BEACH, FL 33401 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: SCHULZ, TIMOTHY, W, P.A. 09/30/2008

> 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:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change ( ) Addition PRFS ( ) Delete Title: PRFS MANUSUTHAKIS, EMANUEL Name: Name: MANUSUTHAKIS, EMANUEL 9656 COLOCASIA WAY 351 N. CONGRESS AVE., SUITE 288 Address: Address: City-St-Zip: BOYNTON BEACH, FL 33436 US City-St-Zip: BOYNTON BEACH, FL 33426 US

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

MOSCARIELLO, LES Name: Name: 16034 E. PIMLICO DRIVE Address: Address: LOXAHATCHEE, FL 33470 US City-St-Zip: City-St-Zip:

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

MANUSUTHAKIS, EMANUEL Name: Name: 9656 COLOCASIA WAY Address: Address: City-St-Zip: BOYNTON BEACH, FL 33436 US City-St-Zip:

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

MOSCARIELLO, LES Name: Name: Address: 16034 E. PIMLICO DRIVE Address: City-St-Zip: LOXAHATCHEE, FL 33470 US 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: EMANUEL MANUSUTHAKIS **PRES** 09/30/2008