

# **2012 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P06000150073

**FILED**  
**Feb 09, 2012**  
**Secretary of State**

**Entity Name:** THE LAW OFFICE OF CHRISTOPHER S O'KEEFE, P.A.

**Current Principal Place of Business:**

4520 SKYLINE BLVD  
UNIT 204  
CAPE CORAL, FL 33904 US

**New Principal Place of Business:**

1318 SE 37TH TERRACE  
CAPE CORAL, FL 33904 US

**Current Mailing Address:**

1318 SOUTHEAST 37TH TERRACE  
CAPE CORAL, FL 33904 US

**New Mailing Address:**

1318 SE 37TH TERRACE  
CAPE CORAL, FL 33904 US

**FEI Number:** 20-8002348

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

O'KEEFE, CHRISTOPHER S  
4520 SKYLINE BLVD  
UNIT 204  
CAPE CORAL, FL 33914 US

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

O'KEEFE, CHRISTOPHER S  
1318 SE 37 TERRACE  
CAPE CORAL,, FL 33904 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:** CHRISTOPHER S. O'KEEFE

02/09/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** O'KEEFE, CHRISTOPHER S  
**Address:** 1318 SE 37 TERRACE  
**City-St-Zip:** CAPE CORAL, FL 33904 US

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:** CHRISTOPHER S. O'KEEFE

PRES

02/09/2012

Electronic Signature of Signing Officer or Director

Date