

# 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000156034

**FILED**  
**Oct 08, 2007**  
**Secretary of State**

**Entity Name:** LIVE OAK MANAGEMENT SERVICES, INC

**Current Principal Place of Business:**

25810 ADAMS ROAD  
LOS GATOS, CA 95033 US

**New Principal Place of Business:**

9611 N. US HWY 1  
SUITE 226  
SEBASTIAN, FL 32958 US

**Current Mailing Address:**

25810 ADAMS ROAD  
LOS GATOS, CA 95033 US

**New Mailing Address:**

9611 N. US HWY 1  
SUITE 226  
SEBASTIAN, FL 32958 US

**FEI Number:** 20-8040829

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PATHFINDER BUSINESS STRATEGIES, LLC  
10315 102ND TERRACE  
SEBASTIAN, FL 32958 US

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

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:** TERRI HINZMAN

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** P ( ) Delete  
**Name:** GUSEWITCH, GARY  
**Address:** 25810 ADAMS RD  
**City-St-Zip:** LOS GATOS, CA 95033 US

**Title:** VP ( ) Delete  
**Name:** POWERS, REBECCA  
**Address:** 25810 ADAMS RD  
**City-St-Zip:** LOS GATOS, CA 95033 US

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

**Title:** P (X) Change ( ) Addition  
**Name:** GUSEWITCH, GARY A  
**Address:** 25810 ADAMS RD  
**City-St-Zip:** LOS GATOS, CA 95033 US

**Title:** VP (X) Change ( ) Addition  
**Name:** POWERS, REBECCA A  
**Address:** 14651 S. BASCOM AVE., STE. 225  
**City-St-Zip:** LOS GATOS, CA 95032 US

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:** GARY A. GUSEWITCH

**PRES**

**10/08/2007**

Electronic Signature of Signing Officer or Director

Date