

# **2009 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P07000022434

**FILED**  
**Jan 12, 2009**  
**Secretary of State**

**Entity Name:** PHOENIX ENTERPRISES OF AMELIA ISLAND, INC.

**Current Principal Place of Business:**

1100 S 14TH ST.  
FERNANDINA BEACH, FL 32034

**New Principal Place of Business:**

**Current Mailing Address:**

1100 S 14TH ST.  
FERNANDINA BEACH, FL 32034

**New Mailing Address:**

96178 SEA WINDS DRIVE  
FERNANDINA BEACH, FL 32034

**FEI Number:** 36-4607627

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

HUGHES, BILL  
93178 SEA WINDS DR.  
AMELIA ISLAND, FL 32034 US

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

HUGHES, BILL  
96178 SEA WINDS DR.  
AMELIA ISLAND, FL 32034 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: BILL HUGHES

01/12/2009

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: HUGHES, BILL  
Address: 96178 SEA WINDS DR.  
City-St-Zip: FRN. BCH, FL 32034

Title: VP ( ) Delete  
Name: HUGHES, BEVERLY  
Address: 96178 SEA WINDS DR.  
City-St-Zip: FRN. BCH, FL 32034

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

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

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: BILL HUGHES

P

01/12/2009

Electronic Signature of Signing Officer or Director

Date