

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

**FILED**  
**Nov 25, 2008**  
**Secretary of State**

DOCUMENT# P07000062746

Entity Name: DORZA INC.

**Current Principal Place of Business:**

3605-1 SPRING GLEN ROAD  
JACKSONVILLE, FL 32207

**New Principal Place of Business:**

3272 LAKE EFFIE COURT NORTH  
JACKSONVILLE, FL 32277

**Current Mailing Address:**

3605-1 SPRING GLEN ROAD  
JACKSONVILLE, FL 32207

**New Mailing Address:**

3272 LAKE EFFIE COURT NORTH  
JACKSONVILLE, FL 32277

FEI Number: 26-0701263

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

BEARD, BRUCE D  
3605-1 SPRING GLEN ROAD  
JACKSONVILLE, FL 32207 US

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

BEARD, BRUCE D  
3272 LAKE EFFIE COURT NORTH  
JACKSONVILLE, FL 32277 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: BRUCE D BEARD

11/25/2008

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: PRES ( ) Delete  
Name: BEARD, BRUCE D  
Address: 3605-1 SPRING GLEN ROAD  
City-St-Zip: JACKSONVILLE, FL 32207

Title: VP ( ) Delete  
Name: BEARD, ZANDRA O  
Address: 3605-1 SPRING GLEN ROAD  
City-St-Zip: JACKSONVILLE, FL 32207

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

Title: PRES (X) Change ( ) Addition  
Name: BEARD, BRUCE D  
Address: 3272 LAKE EFFIE COURT N  
City-St-Zip: JACKSONVILLE, FL 32277

Title: VP (X) Change ( ) Addition  
Name: BEARD, ZANDRA O  
Address: 3272 LAKE EFFIE COURT N  
City-St-Zip: JACKSONVILLE, FL 32277

Title: SECR ( ) Change (X) Addition  
Name: BEARD, ZANEESHA L  
Address: 3272 LAKE EFFIE COURT NORTH  
City-St-Zip: JACKSONVILLE, FL 32277

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: BRUCE D BEARD

PRES

11/25/2008

Electronic Signature of Signing Officer or Director

Date