2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000063338

Entity Name: BOLTON & WATERS, INC.

FILED Mar 18, 2009 Secretary of State

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

500 NORTH WESTSHORE BLVD. 204 37TH AVE N

SUITE 920 SUITE 314

TAMPA, FL 33609 US ST. PETERSBURG, FL 33704 US

Current Mailing Address: New Mailing Address:

500 NORTH WESTSHORE BLVD. 204 37TH AVE N

SUITE 314 SUITE 920

TAMPA, FL 33609 US ST. PETERSBURG, FL 33704 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

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

BLACKWELL, KENDRICK J GREMALD, DOUGLAS R 500 NORTH WESTSHORE BLVD. 204 37TH AVE N

SUITE 920 SUITE 314

TAMPA, FL 33609 US ST. PETERSBURG, FL 33704 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: DOUGLAS GREMALD 03/18/2009

> 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 ().

TAMPA, FL 33609 US

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

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

HORAH, GERRY Name: Name: GREMALD, DOUGLAS R 500 NORTH WESTSHORE BLVD. SUITE 920 Address: 204 37TH AVE N SUITE 314 Address:

City-St-Zip: TAMPA, FL 33609 US City-St-Zip: ST. PETERSBURG, FL 33704 US

Title: DVP Title: **DVPS** (X) Change () Addition () Delete Name: GREMALD, DOUGLAS Name: BLACKWELL, KENDRICK J 500 NORTH WESTSHORE BLVD. SUITE 920 204 37TH AVE N SUITE 314 Address: Address:

TAMPA, FL 33609 US ST. PETERSBURG, FL 33704 US City-St-Zip: City-St-Zip:

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

BLACKWELL, KENDRICK J Name: Name: 500 NORTH WESTSHORE BLVD. SUITE 920 Address: 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.

City-St-Zip:

SIGNATURE: DOUGLAS GREMALD SVP 03/18/2009