

# **2009 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P07000125572

Entity Name: WINGS OVER FLORIDA, INC.

**FILED**  
**Nov 23, 2009**  
**Secretary of State**

## **Current Principal Place of Business:**

1024 CENTURIAN PARKWAY NORTH  
SUITE 305  
JACKSONVILLE, FL 32256

## **New Principal Place of Business:**

## **Current Mailing Address:**

1024 CENTURIAN PARKWAY NORTH  
SUITE 305  
JACKSONVILLE, FL 32256

## **New Mailing Address:**

FEI Number: 13-4368081

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KEASLER, FRANK R JR.  
10245 CENTURION PARKWAY NORTH SUITE 305  
JACKSONVILLE, FL 32256 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: FRANK R. KEASLER, JR.

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: OWENBY, DARRELL  
Address: 10245 CENTURION PKWY. N. SUITE 305  
City-St-Zip: JACKSONVILLE, FL 32256

Title: DCP ( ) Delete  
Name: MEDLOCK, ROGER  
Address: 10245 CENTRUION PKWY. N. SUITE 305  
City-St-Zip: JACKSONVILLE, FL 32256

## **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: DARRELL OWENBY

DP

11/23/2009

Electronic Signature of Signing Officer or Director

Date