

2010 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P08000008573

FILED
Dec 06, 2010
Secretary of State

Entity Name: CCM ENTERPRISES OF NORTH FLORIDA, INC.

Current Principal Place of Business:

6120 LAWRENCEVILLE CIRCLE
JACKSONVILLE, FL 32217

New Principal Place of Business:

4446 HENDRICKS AVE
SUITE 344
JACKSONVILLE, FL 32207

Current Mailing Address:

6120 LAWRENCEVILLE CIRCLE
JACKSONVILLE, FL 32217

New Mailing Address:

4446 HENDRICKS AVE
SUITE 344
JACKSONVILLE, FL 32207

FEI Number: 26-1823462

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALLACE, ROBERT
7400 BAYMEADOWS WAY
#106
JACKSONVILLE, FL 32256 US

Name and Address of New Registered Agent:

VAVERKA, CORLEENE
4446 HENDRICKS AVE
SUITE 344
JACKSONVILLE, FL 32207 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: CORLEENE VAVERKA

12/06/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PST
Name: VAVERKA, CORLENE
Address: 4446 HENDRICKS AVE SUITE 344
City-St-Zip: JACKSONVILLE, FL 32207

I hereby 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 all other like empowered.

SIGNATURE: CORLEENE VAVERKA

PRES

12/06/2010

Electronic Signature of Signing Officer or Director

Date