

# **2009 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P08000027967

Entity Name: 1AROUND THE HOUSE, CORP

**FILED**  
**Nov 09, 2009**  
**Secretary of State**

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

34715 ORANGE BELT DRIVE  
DADE CITY, FL 33523

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

## **Current Mailing Address:**

34715 ORANGE BELT DRIVE  
DADE CITY, FL 33523

## **New Mailing Address:**

FEI Number: 26-2188326

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WEBBER, ZANE P  
707 GREEN COVE DRIVE  
BRANDON, FL 33510 US

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

WEBBER, ZANE P  
1019 EMERALD HILL WAY  
VALRICO, FL 33594 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: ZANE WEBBER

11/09/2009

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: FLOWERS, CHARLES J  
Address: 34715 ORANGE BELT DRIVE  
City-St-Zip: DADE CITY, FL 33523

Title: VP ( ) Delete  
Name: FLOWERS, MELISSA D  
Address: 34715 ORANGE BELT DRIVE  
City-St-Zip: DADE CITY, FL 33523

## **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: CHARLES JEFFREY FLOWERS

P

11/09/2009

Electronic Signature of Signing Officer or Director

Date