

# **2010 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P08000048198

**FILED**  
**Jan 05, 2010**  
**Secretary of State**

**Entity Name:** REFERRAL ASSOCIATE NETWORK, INC.

**Current Principal Place of Business:**

1526 ARNOLD DR.  
MELBOURNE, FL 32935

**New Principal Place of Business:**

10451 NW 35 PL  
GAINESVILLE, FL 32606

**Current Mailing Address:**

1526 ARNOLD DR.  
MELBOURNE, FL 32935

**New Mailing Address:**

7257 NW 4TH BLVD  
SUITE 77  
GAINESVILLE, FL 32607

**FEI Number:** 26-2651710

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HELMS, JANET M  
1526 ARNOLD DR.  
MELBOURNE, FL 32935 US

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

HELMS, JANET M  
7257 NW 4TH BLVD  
SUITE 77  
GAINESVILLE, FL 32607 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: JANET M HELMS

01/05/2010

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: DPV  
Name: HELMS, JANET M  
Address: 7257 NW 4TH BLVD, SUITE 77  
City-St-Zip: GAINESVILLE, FL 32607

Title: ST  
Name: HELMS, JANET M  
Address: 7257 NW 4TH BLVD, SUITE 77  
City-St-Zip: GAINESVILLE, FL 32607

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: JANET M HELMS

DPV

01/05/2010

Electronic Signature of Signing Officer or Director

Date