

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P08000088211

FILED
Oct 13, 2009
Secretary of State

Entity Name: ROADSHIPS AMERICA INCORPORATED

Current Principal Place of Business:

CITY CENTER 525 N TRYON ST STE 1600
CHARLOTTE, NC 28202

New Principal Place of Business:

CITY CENTER 525 N TRYON ST
STE 1600
CHARLOTTE, NC 28202

Current Mailing Address:

CITY CENTER 525 N TRYON ST STE 1600
CHARLOTTE, NC 28202

New Mailing Address:

CITY CENTER 525 N TRYON ST
STE 1600
CHARLOTTE, NC 28202

FEI Number: 26-3505267

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SMITH, ROBERT
5976 20TH STREET NO 177
VERO BEACH, FL 32966 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: ROBERT SMITH

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: DPT () Delete
Name: NUGENT, MICHAEL
Address: 1451 WEST CYPRESS CREEK ROAD STE 300
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: DS () Delete
Name: SMITH, ROBERT
Address: 1451 WEST CYPRESS CREEK ROAD STE 300
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: DCFO () Delete
Name: MCCLELLAND, ROBERT
Address: CITY CENTER 525 N TRYON ST STE 1600
City-St-Zip: CHARLOTTE, NC 28202

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DCEO (X) Change () Addition
Name: NUGENT, MICHAEL
Address: CITY CENTER 525 N TRYON ST STE 1600
City-St-Zip: CHARLOTTE, FL 28202

Title: DPS (X) Change () Addition
Name: SMITH, ROBERT
Address: CITY CENTER 525 N TRYON ST STE 1600
City-St-Zip: CHARLOTTE, FL 28202

Title: DT (X) Change () Addition
Name: MCCLELLAND, ROBERT
Address: CITY CENTER 525 N TRYON ST STE 1600
City-St-Zip: CHARLOTTE, NC 28202

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: ROBERT SMITH

DPS

10/13/2009

Electronic Signature of Signing Officer or Director

Date