

# **2009 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P08000101829

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

**Entity Name:** CHECKERS HOME RESOURCES AND CONSULTING, INC

**Current Principal Place of Business:**

102 NE 2ND STREET  
386  
BOCA RATON, FL 33432 US

**New Principal Place of Business:**

**Current Mailing Address:**

102 NE 2ND STREET  
386  
BOCA RATON, FL 33432 US

**New Mailing Address:**

**FEI Number:** 26-3724901      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

BRINK, CORINNA  
5447 GRAND PARK PLACE  
BOCA RATON, FL 33486 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:** CORINNA BRINK

\_\_\_\_\_  
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:** BRINK, CORINNA  
**Address:** 5447 GRAND PARK PLACE  
**City-St-Zip:** BOCA RATON, FL 33486 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

**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:** CORINNA BRINK

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

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10/23/2009

\_\_\_\_\_  
Date