

# **2010 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P09000045876

**Entity Name:** GLADES EXTREME TUTORING, INC

**FILED**  
**Oct 07, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

388 ANNONA AVENUE  
PAHOKEE, FL 33476

**New Principal Place of Business:**

**Current Mailing Address:**

P.O.BOX 665  
PAHOKEE, FL 33476

**New Mailing Address:**

FEI Number: 27-0192359      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

HILL, FELISIA C  
388 ANNONA AVENUE  
PAHOKEE, FL 33475 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: FELISIA HILL

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: HILL, FELISIA  
Address: P.O.BOX 665  
City-St-Zip: PAHOKEE, FL 33476

Title: VP  
Name: HILL, SARAH N  
Address: P.O.BOX 346  
City-St-Zip: PAHOKEE, FL 33476

Title: D  
Name: HILL, FASHARA L  
Address: 397 ANNONA AVENUE  
City-St-Zip: PAHOKEE, FL 33476

Title: D  
Name: SISNETT, BRANTLEY  
Address: P.O. BOX 615  
City-St-Zip: PAHOKEE, FL 33476

Title: D  
Name: HARRELL, FREDDIE L  
Address: P.O.BOX 346  
City-St-Zip: PAHOKEE, FL 33476

Title: D  
Name: BRYANT, JOHANNA C  
Address: P.O.BOX 665  
City-St-Zip: PAHOKEE, FL 33476

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: FELISIA HILL

P

10/07/2010

Electronic Signature of Signing Officer or Director

Date