

# 2011 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P10000086547

FILED  
Nov 22, 2011  
Secretary of State

**Entity Name:** CURRELI PROPERTIES, INC.

**Current Principal Place of Business:**

725 COUNTY ROAD 415  
NEW SMYRNA, FL 32168 US

**New Principal Place of Business:**

**Current Mailing Address:**

725 COUNTY ROAD 415  
NEW SMYRNA, FL 32168 US

**New Mailing Address:**

**FEI Number:** 27-3751394

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CURRELI, ALAN F  
725 COUNTY ROAD 415  
NEW SMYRNA, FL 32168 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: ALAN F CURRELI

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P, D  
Name: CURRELI, ALAN F  
Address: 725 COUNTY ROAD  
City-St-Zip: NEW SMYRNA, FL 32168 US

Title: T, S  
Name: CURRELI, CHERYL  
Address: 725 COUNTY ROAD 415  
City-St-Zip: NEW SMYRNA, FL 32168 US

Title: D  
Name: CURRELI, CHERYL  
Address: 725 COUNTY ROAD 415  
City-St-Zip: NEW SMYRNA, FL 32168 US

Title: VP  
Name: CURRELI, ALAN J  
Address: 729 NATURES WALK  
City-St-Zip: GRAY, GA 31032 US

Title: D  
Name: CURRELI, ALAN J  
Address: 729 NATURES WALK  
City-St-Zip: GRAY, GA 31032 US

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: CHERYL CURRELI

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

T S

11/22/2011

\_\_\_\_\_  
Date