

# **2013 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P10000097762

**FILED**  
**Jan 17, 2013**  
**Secretary of State**

**Entity Name:** NEED A BUS INC.

**Current Principal Place of Business:**

6221 BIENVILLE DR  
PENSACOLA, FL 32505 US

**New Principal Place of Business:**

5705 N PALAFOX STREET  
PENSACOLA, FL 32503 US

**Current Mailing Address:**

6221 BIENVILLE DR  
PENSACOLA, FL 32505 US

**New Mailing Address:**

**FEI Number:** 27-4137290      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

SHIPP, TAFFANY A  
6221 BIENVILLE DRIVE  
PENSACOLA, FL 32505 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:** TAFFANY A SHIPP

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

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** SHIPP, TAFFANY A  
**Address:** 6221 BIENVILLE DR  
**City-St-Zip:** PENSACOLA, FL 32505 US

**Title:** DT  
**Name:** ARNOLD, HENRY L  
**Address:** 4551 TERRA SANTA  
**City-St-Zip:** PENSACOLA, FL 32504 US

**Title:** DS  
**Name:** WILSON, EDDIE  
**Address:** 6221 BIENVILLE DR  
**City-St-Zip:** PENSACOLA, FL 32505 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:** TAFFANY A SHIPP

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

P

01/17/2013

\_\_\_\_\_  
Date