

# **2014 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P13000082430

**FILED**  
**Sep 30, 2014**  
**Secretary of State**

**Entity Name:** EDUCATION FOR INNOVATION, INC.

**Current Principal Place of Business:**

1720 MANATEE AVE W  
BRADENTON, FL 34205

**New Principal Place of Business:**

**Current Mailing Address:**

1720 MANATEE AVE W  
BRADENTON, FL 34205

**New Mailing Address:**

**FEI Number:** 46-3952020

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

THOMPSON, W.WADE  
1720 MANATEE AVE.W.  
BRADENTON, FL 34205 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:** W. WADE THOMPSON

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** D  
**Name:** THOMPSON, ROBIN  
**Address:** 1720 MANATEE AVE W  
**City-St-Zip:** BRADENTON, FL 34205

**Title:** D  
**Name:** COMPTON, MICHELLE  
**Address:** 1720 MANATEE AVE W  
**City-St-Zip:** BRADENTON, FL 34205

**Title:** D  
**Name:** SEVERSON, BETH  
**Address:** 1720 MANATEE AVE W  
**City-St-Zip:** BRADENTON, FL 34205

**Title:** D  
**Name:** MECKLEY, MAIDIE  
**Address:** 1720 MANATEE AVE W  
**City-St-Zip:** BRADENTON, FL 34205

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:** ROBIN THOMPSON

DIR

09/30/2014

Electronic Signature of Signing Officer or Director

Date