

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P93000003054

Entity Name: BONITA BEACH BLUES, INC.

FILED
Aug 16, 2005
Secretary of State

Current Principal Place of Business:

26460 HICKORY BLVD.
BONITA SPRINGS, FL 34134

New Principal Place of Business:

27420 HICKORY BLVD.
BONITA SPRINGS, FL 34134

Current Mailing Address:

26460 HICKORY BLVD.
BONITA SPRINGS, FL 34134

New Mailing Address:

27420 HICKORY BLVD.
BONITA SPRINGS, FL 34134

FEI Number: 65-0381266

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EMFIELD, ROBERT M
26460 HICKORY BLVD.
BONITA SPRINGS, FL 33923 US

Name and Address of New Registered Agent:

EMFIELD, ROBERT M
27420 HICKORY BLVD.
BONITA SPRINGS, FL 33923 US

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: ROBERT M. EMFIELD

08/16/2005

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: EMFIELD, ROBERT M
Address: 26460 HICKORY BLVD.
City-St-Zip: BONITA SPRINGS, FL 34134

Title: S () Delete
Name: EMFIELD, GREGG
Address: 125 MOUND AVE
City-St-Zip: TONKA BAY, MN 55331

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: EMFIELD, ROBERT M
Address: 27420 HICKORY BLVD.
City-St-Zip: BONITA SPRINGS, FL 34134

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ROBERT M. EMFIELD

P

08/16/2005

Electronic Signature of Signing Officer or Director

Date