

# **2010 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P93000076927

**FILED**  
**Oct 20, 2010**  
**Secretary of State**

**Entity Name:** LYONSBROUGH GALLERY, INC.

**Current Principal Place of Business:**

445 E. ATLANTIC AVE  
DELRAY BEACH, FL 33483

**New Principal Place of Business:**

**Current Mailing Address:**

445 E. ATLANTIC AVE  
DELRAY BEACH, FL 33483

**New Mailing Address:**

**FEI Number:** 65-0447666

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SORENSEN, ORA  
600 ATLANTIC ESTATES WAY  
ATLANTIS, FL 33462 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:** ORA SORENSEN

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

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** SORENSEN, ORA  
**Address:** 600 ATLANTIS ESTATES WAY  
**City-St-Zip:** ATLANTIS, FL 33462 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:** ORA SORENSEN

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

PRES

10/20/2010

\_\_\_\_\_  
Date