

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P94000027747

Entity Name: ABSOLUTELY FREE, INC.

FILED
Mar 16, 2005
Secretary of State

Current Principal Place of Business:

815 SANDLAKE RD
ORLANDO, FL 32809

New Principal Place of Business:

127 W FAIRBANKS AVE
458
WINTER PARK, FL 32789

Current Mailing Address:

815 SANDLAKE RD
ORLANDO, FL 32809

New Mailing Address:

127 W FAIRBANKS
458
WINTER PARK, FL 32789

FEI Number: 59-3242067

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RUMPEL, BARBARA
690 OSCEOLA AVE
309
WINTER PARK, FL 32789 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: BARBARA RUMPEL

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: RUMPEL, BARBARA
Address: 690 OSCEOLA AVE.
City-St-Zip: WINTER PARK, FL 32789

Title: VP () Delete
Name: RUMPEL, JOHN
Address: 690 OSCEOLA AVE.
City-St-Zip: WINTER PARK, FL 32789

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: BARBARA RUMPEL

P

03/16/2005

Electronic Signature of Signing Officer or Director

Date