

# **2004 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P94000076374

Entity Name: MACPRO SOFTWARE, INC.

**FILED**  
**Oct 26, 2004**  
**Secretary of State**

## **Current Principal Place of Business:**

6650 SOUTHPOINT PKWY  
SUITE 200  
JACKSONVILLE, FL 32216 US

## **Current Mailing Address:**

P.O. BOX 551190  
JACKSONVILLE, FL 322551190 US

## **New Principal Place of Business:**

6675 CORPORATE CENTER PARKWAY  
SUITE 200  
JACKSONVILLE, FL 32216 US

## **New Mailing Address:**

6675 CORPORATE CENTER PARKWAY  
SUITE 200  
JACKSONVILLE, FL 32216 US

FEI Number: 59-3274604

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

## **Name and Address of New Registered Agent:**

LEWIS, GEORGINA  
6675 CORPORATE CENTER PARKWAY  
SUITE 200  
JACKSONVILLE, FL 32216 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: GEORGINA LEWIS

10/26/2004

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: DPST ( ) Delete  
Name: LEWIS, GEORGINA  
Address: 6650 SOUTHPOINT PKWY #200  
City-St-Zip: JACKSONVILLE, FL 32216

## **ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DPST (X) Change ( ) Addition  
Name: LEWIS, GEORGINA  
Address: 6675 CORPORATE CENTER PARKWAY, SUITE 200  
City-St-Zip: JACKSONVILLE, FL 32216

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: GEORGINA LEWIS

PRES

10/26/2004

Electronic Signature of Signing Officer or Director

Date