

# **2014 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P95000034041

**FILED**  
**Nov 24, 2014**  
**Secretary of State**

**Entity Name:** AIRPORT COMMERCE PARK ASSOCIATES, INC.

**Current Principal Place of Business:**

500 AUSTRALIAN AVE SO.,  
SUITE 120  
WEST PALM BEACH, FL 33401 UN

**New Principal Place of Business:**

**Current Mailing Address:**

500 AUSTRALIAN AVE SO.,  
SUITE 120  
WEST PALM BEACH, FL 33401

**New Mailing Address:**

**FEI Number:** 65-0586113

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RHODES, PAUL  
500 SOUTH AUSTRALIAN AVE  
STE 120  
WEST PALM BEACH, FL 33401 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: PAUL RHODES

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

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: LIST, MARTIN A  
Address: 2425 EMBASSY DRIVE  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: S  
Name: RHODES, PAUL  
Address: 500 AUSTRALIAN AVE. S, #120  
City-St-Zip: WEST PALM BEACH, FL 33401

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: PAUL RHODES

S

11/24/2014

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

\_\_\_\_\_  
Date