

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P95000047538

1. Entity Name
PERSONAL GROWTH COUNSELING, INC.



FILED

05 APR 28 AM 8:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



04182005 REIN-P CR2E098 (6/04)

Principal Place of Business
113 LITHIA PINCREST RD.
STE A
BRANDON, FL 33511 US

Mailing Address
113 LITHIA PINCREST RD.
STE A
BRANDON, FL 33511 US

2. Principal Place of Business
5150-S. Florida Ave.
Suite, Apt. #, etc.
STE # 304
City & State
Wakeland, Florida
Zip
33813
Country
U.S.A.

3. Mailing Address
5150-S. Florida Ave.
Suite, Apt. #, etc.
STE # 304
City & State
Wakeland, Fla
Zip
33813
Country
U.S.A.

4. FEI Number
65-0597137

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
DRAWDY, JOSEPH G
113 LITHIA PINCREST RD
STE A
BRANDON, FL 33511

7. Name and Address of New Registered Agent
Name
Joseph G. Drawdy
Street Address (P.O. Box Number is Not Acceptable)
724-HEATHLAND Circle
City
Mulberry, FL
Zip Code
33860

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Joseph G. Drawdy, President
Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when reinstating)
DATE: 4/25/2005

FILE NOW!!! FEE IS \$900.00

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DRAWDY, JOSEPH G 113 LITHIA PINCREST RD., SUITE A BRANDON, FL 33511	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Joseph G. Drawdy 724-HEATHLAND Circle Mulberry, FL 33860
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Joseph G. Drawdy
Signature and typed or printed name of signing officer or director
Date: 4/25/2005
Daytime Phone #: (863) 640-2152

g/ba