

# **2012 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P95000064714

**FILED**  
**Oct 22, 2012**  
**Secretary of State**

**Entity Name:** AMELIA RESEARCH AND RECOVERY COMPANY

**Current Principal Place of Business:**

2075 ORCA CT  
FERNANDINA BEACH, FL 32050 US

**New Principal Place of Business:**

**Current Mailing Address:**

2075 ORCA CT.  
FERNANDINA BEACH, FL 32034

**New Mailing Address:**

**FEI Number:** 59-3527322

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

POPE, CHARLES D  
4163 DOWLING RD.  
MIDDLEBURG, FL 32068 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:** CHARLES D POPE

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

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** POPE, C. DOUGLAS  
**Address:** 4163 DOWLING ROAD  
**City-St-Zip:** MIDDLEBURG, FL 32068

**Title:** D  
**Name:** ELLIOTT, RALPH  
**Address:** 411 WALNUT STREET BOX 411  
**City-St-Zip:** GREEN COVE SPGS, FL 32043

**Title:** T  
**Name:** GAVRON, ED  
**Address:** PO BOX 417  
**City-St-Zip:** MIDDLEBURG, FL 32050

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:** C DOUGLAS POPE

P

10/22/2012

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

\_\_\_\_\_  
Date