

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P95000078188

Entity Name: CLEAR PASSAGE THERAPIES, INC.

FILED  
Oct 01, 2009  
Secretary of State

## Current Principal Place of Business:

3600 NW 43RD ST.  
STE A1  
GAINESVILLE, FL 32606 US

## Current Mailing Address:

6840 NE 225TH STREET  
MELROSE, FL 32666

## New Principal Place of Business:

4421 NW 39TH AVE  
STE 2-2  
GAINESVILLE, FL 326067214 US

## New Mailing Address:

6840 NE 225TH ST  
MELROSE, FL 326666348 US

FEI Number: 65-0625514

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WURN, LAWRENCE J  
6840 NE 225TH STREET  
MELROSE, FL 32666 US

## Name and Address of New Registered Agent:

WURN, LAWRENCE J  
6840 NE 225TH STREET  
MELROSE, FL 326666348 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: LAWRENCE J WURN

10/01/2009

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: P ( ) Delete  
Name: WURN, LAWRENCE J  
Address: 6840 NE 225TH STREET  
City-St-Zip: MELROSE, FL 32666

Title: VP ( ) Delete  
Name: WURN, BELINDA  
Address: 6840 NE 225TH ST  
City-St-Zip: MELROSE, FL 32666

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: WURN, LAWRENCE J  
Address: 6840 NE 225TH STREET  
City-St-Zip: MELROSE, FL 326666348 US

Title: VP (X) Change ( ) Addition  
Name: WURN, BELINDA  
Address: 6840 NE 225TH ST  
City-St-Zip: MELROSE, FL 326666348 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: LAWRENCE J WURN

P

10/01/2009

Electronic Signature of Signing Officer or Director

Date