

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P95000088524

Entity Name: STOUT TRUST FUND I, INC.

FILED
Oct 12, 2009
Secretary of State

Current Principal Place of Business:

592 FIRST CAPE CORAL DR.
WINTER GARDEN, FL 34787

New Principal Place of Business:

6050 S SEMORAN
ORLANDO, FL 32812

Current Mailing Address:

592 FIRST CAPE CORAL DR.
WINTER GARDEN, FL 34787

New Mailing Address:

6050 S SEMORAN
ORLANDO, FL 32812

FEI Number: 59-3348653

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ASMA, WILLIAM N ESQ
884 SOUTH DILLARD STREET
WINTER GARDEN, FL 34787 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: WILLIAM N ASMA, ESQ

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: PD () Delete
Name: STOUT, ROBERT L
Address: 592 FIRST CAPE CORAL DR.
City-St-Zip: WINTER GARDEN, FL 34787

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: STOUT, ROBERT L
Address: 6050 S SEMORAN
City-St-Zip: ORLANDO, FL 32812

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: ROBERT L STOUT

PRES

10/12/2009

Electronic Signature of Signing Officer or Director

Date