2007 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Nov 01, 2007
Secretary of State

DOCUMENT# P96000000852

Entity Name: SMALL MOVES, INC. OF ORLANDO

Current Principal Place of Business:

1490 W FAIRBANKS AVE
WINTER PARK, FL 327894806 US

New Principal Place of Business:

800 HAROLD AVE
WINTER PARK, FL 32789 US

Current Mailing Address:

1490 W FAIRBANKS AVE
WINTER PARK, FL 327894806 US

New Mailing Address:

800 HAROLD AVE
WINTER PARK, FL 32789 US

FEI Number: 59-3354752 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KINCAID, JAMES
1490 W FAIRBANKS AVE
WINTER PARK, FL 327894806 US

Name and Address of New Registered Agent:

KINCAID, JAMES
800 HAROLD AVE
WINTER PARK, FL 32789 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: JAMES KINCAID 11/01/2007
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: KINCAID, JAMES
Address: 1490 W FAIRBANKS AVE
City-St-Zip: WINTER PARK, FL 32789

Title: VSTD ( ) Delete
Name: KINCAID, CYNTHIA
Address: 1490 W FAIRBANKS AVE
City-St-Zip: WINTER PARK, FL 32789

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: KINCAID, JAMES
Address: 800 HAROLD AVE
City-St-Zip: WINTER PARK, FL 32789

Title: VSTD (X) Change ( ) Addition
Name: KINCAID, CYNTHIA
Address: 800 HAROLD AVE
City-St-Zip: WINTER PARK, FL 32789

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: JAMES KINCAID PD 11/01/2007
Electronic Signature of Signing Officer or Director Date