2006 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 04, 2006
Secretary of State

DOCUMENT# P96000051842

Entity Name: R. COSGROVE, INC.

Current Principal Place of Business:

406 FARMERS MARKET RD
FORT PIERCE, FL 34982 US

New Principal Place of Business:

Current Mailing Address:

406 FARMERS MARKET RD
FORT PIERCE, FL 34982 US

New Mailing Address:

FEI Number: 65-0669034 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COSGROVE, ROBERT
797 WOODLANDS DRIVE
PORT ST LUCIE, FL 34952 US

Name and Address of New Registered Agent:

COSGROVE, KAROL S
797 WOODLANDS DRIVE
PORT ST LUCIE, FL 34952 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: KAROL S. COSGROVE 10/04/2006
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: COSGROVE, ROBERT
Address: 797 WOODLANDS DRIVE
City-St-Zip: PORT ST LUCIE, FL

Title: VP ( ) Delete
Name: COSGROVE, KAROL S
Address: 797 WOODLANDS DRIVE
City-St-Zip: PORT ST LUCIE, FL

Title: ST ( ) Delete
Name: COSGROVE, KAROL S
Address: 797 WOODLANDS DRIVE
City-St-Zip: PORT ST. LUCIE, FL 34952

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: COSGROVE, KAROL S
Address: 797 WOODLANDS DRIVE
City-St-Zip: PORT ST LUCIE, FL

Title: VP (X) Change ( ) Addition
Name: BRIGGS, RICHARD A JR.
Address: 797 WOODLANDS DRIVE
City-St-Zip: PORT ST LUCIE, FL

Title: S (X) Change ( ) Addition
Name: COSGROVE, KAROL S
Address: 797 WOODLANDS DRIVE
City-St-Zip: PORT ST. LUCIE, FL 34952

Title: T ( ) Change (X) Addition
Name: BRIGGS, ERIK M
Address: 205 EDGEVALE RD.
City-St-Zip: BALTIMORE, MD 21210

I hereby certify that the information supplied with this filing does not qualify for the 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: KAROL S. COSGROVE P 10/04/2006
Electronic Signature of Signing Officer or Director Date