

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P96000096880

FILED
Oct 10, 2005
Secretary of State

Entity Name: EARNING CAPACITY ASSESSMENTS, INC.

Current Principal Place of Business:

PO BOX 893
VALRICO, FL 335950893

New Principal Place of Business:

Current Mailing Address:

PO BOX 893
VALRICO, FL 335950893

New Mailing Address:

FEI Number: 65-0721158

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROD, SHERMAN M
324 NO DALE MABRY HIGHWAY STE 300
TAMPA, FL 33609 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: SHERMAN M. BROD

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: COLLARD, STEVEN M.
Address: 2719 BUCKHORN OAKS DR
City-St-Zip: VALRICO, FL 33594

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: STEVEN M. COLLARD

PRES

10/10/2005

Electronic Signature of Signing Officer or Director

Date