## 2008 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P97000029026

Entity Name: SPATIAL DYNAMICS, INC.

**FILED** Mar 25, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

601 AVENDIA TERESA 1001 BRIDGEWAY SAN CLEMENTE, CA 92672

#536

SAUSALITO, CA 94965 US

**Current Mailing Address: New Mailing Address:** 

1001 BRIDGEWAY 601 AVENDIA TERESA

SAN CLEMENTE, CA 92672 #536

SAUSALITO, CA 94965 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PALMER, COLLEEN E

(X) Change ( ) Addition

FEI Number: 65-0742958 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GERBER, JACK B CORPORATION SERVICES COMPANY 9400 S. DADELAND BLVD., PH-5 1201 HAYES STREET

TALLAHASSEE, FL 32301 MIAMI, FL 33156 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: CORPORATION SERVICES COMPANY 03/25/2008

> Electronic Signature of Registered Agent Date

> > Title:

Name:

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: ( ) Delete PALMER, COLLEEN E Name:

601 AVENIDA TERESA 353 SACRAMENTO #200 Address: Address: City-St-Zip: SAN CLEMENTE, CA 92672 OC City-St-Zip: SAN FRANCISCO, CA 94111 US

Title: Title: (X) Change ( ) Addition () Delete PALMER, WILLIAM C Name: Name: PALMER, WILLIAM C

601 AVENIDA TERESA Address: 353 SACRAMENTO #200 Address: SAN FRANCISCO, CA 94111 US SAN CLEMENTE, CA 92672 OC City-St-Zip: City-St-Zip:

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: COLLEEN E. PALMER PD 03/25/2008