

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P97000045221

FILED
Apr 30, 2008
Secretary of State

Entity Name: PRO FORMA MANAGEMENT, INC.

Current Principal Place of Business:

203 LIVE OAK AVENUE
DEFUNIAK SPRINGS, FL 32435 US

New Principal Place of Business:

187 LIVE OAK AVENUE
DEFUNIAK SPRINGS, FL 32435 US

Current Mailing Address:

POST OFFICE BOX 147
DEFUNIAK SPRINGS, FL 32435 US

New Mailing Address:

187 LIVE OAK AVENUE
DEFUNIAK SPRINGS, FL 32435 US

FEI Number: 59-3447671

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARPENTER, CHARLES M
402 PARK AVENUE
DEFUNIAK SPRINGS, FL 32435 US

Name and Address of New Registered Agent:

CARPENTER, CHARLES M
187 LIVE OAK AVENUE
DEFUNIAK SPRINGS, FL 32435 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: CHARLES M. CARPENTER

04/30/2008

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: DP () Delete
Name: CARPENTER, CHARLES M
Address: 402 PARK AVENUE
City-St-Zip: DEFUNIAK SPRINGS, FL 32435 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: CARPENTER, CHARLES M
Address: 187 LIVE OAK AVENUE
City-St-Zip: DEFUNIAK SPRINGS, FL 32435 US

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: CHARLES M. CARPENTER

DP

04/30/2008

Electronic Signature of Signing Officer or Director

Date