

# **2005 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P97000082729

**FILED**  
**Jul 05, 2005**  
**Secretary of State**

**Entity Name:** OLD MISSION ASSESSMENT CORPORATION

**Current Principal Place of Business:**

4166 EVELYN STREET  
TRAVERSE CITY, MI 49686 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 3219  
TRAVERSE CITY, MI 49685

**New Mailing Address:**

**FEI Number:** 65-0972869

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WILCOX, ROBERT D  
7971 HUNTERS GROVE RD  
JACKSONVILLE, FL 32256 US

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

LITTMAN, ERIC P  
7695 SW 104TH STREET  
SUITE 210  
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: ERIC P. LITTMAN

07/05/2005

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: CIMINI, ANTHONY M SR  
Address: 4166 EVELYN STREET  
City-St-Zip: TRAVERSE CITY, MI 49686 US

Title: D ( ) Delete  
Name: RIGGS, MARILYN T  
Address: 4166 EVELYN STREET  
City-St-Zip: TRAVERSE CITY, MI 49686 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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: ANTHONY CIMINI

P

07/05/2005

Electronic Signature of Signing Officer or Director

Date