## 2007 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P98000024390

FILED Apr 03, 2007 Secretary of State

Entity Na	me: E-FORM	, INC.		
Current P	rincipal Place	of Business:	New Principal Place	of Business:
	ITAL CIRCLE I SSEE, FL 323			
Current M	lailing Addres	ss:	New Mailing Address:	
	ITAL CIRCLE I SSEE, FL 323			
FEI Number	: 59-3499987	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired (X)
Name and	d Address of (	Current Registered Agent:	Name and Address	of New Registered Agent:
3483 SED	ER, GERALD T ONA LOOP SSEE, FL 323	08 US		
	e named entity e of Florida.	submits this statement for the	purpose of changing its registere	ed office or registered agent, or both,
SIGNATU	RE: GERALD	T MORTIMER		
	Electron	nic Signature of Registered Ag	ent	Date
Election Ca	mpaign Financin	g Trust Fund Contribution ( ).		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PT ( MORTIMER, G 3483 SEDONA TALLAHASSEE	LOOP	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	DS ( MORTIMER, M 1540 VALLEY TALLAHASSEE	ROAD	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	D ( MORTIMER, M 1126 MAGNOL TALLAHASSEE	IA DRIVE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	MORTIMER, N 8919 GITTEMS		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title:	D (	) Delete	Title ·	( ) Change ( ) Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: GERALD T MORTIMER PT 04/03/2007

FITZGERALD, MICHAEL

106 HOOK ROAD

CANDIA, NH 03034

Name:

Address:

City-St-Zip: