

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P98000068927

FILED  
Oct 28, 2008  
Secretary of State

Entity Name: AKITA COPY SYSTEMS OF SARASOTA, INC.

## Current Principal Place of Business:

2341 PORTER LAKE DR.  
SUITE 209  
SARASOTA, FL 34240

## New Principal Place of Business:

## Current Mailing Address:

5410 A PIONEER PARK BLVD  
TAMPA, FL 33634

## New Mailing Address:

5412 A PIONEER PARK BLVD  
TAMPA, FL 33634

FEI Number: 65-0864347

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LOCKLER, MITCHELL  
5410 A PIONEER PARK BLVD  
TAMPA, FL 33634 US

## Name and Address of New Registered Agent:

LOCKLER, MITCHELL  
5412 A PIONEER PARK BLVD  
TAMPA, FL 33634 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: KAREN S. LOCKLER

10/28/2008

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: P ( ) Delete  
Name: LOCKLER, MITCHELL  
Address: 18979 CROOKED LANE  
City-St-Zip: LUTZ, FL 33549

Title: SVP ( ) Delete  
Name: LOCKLER, KAREN  
Address: 18979 CROOKED LANE  
City-St-Zip: LUTZ, FL 33549

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: LOCKLER, MITCHELL  
Address: 18979 CROOKED LANE  
City-St-Zip: LUTZ, FL 33548

Title: SVP (X) Change ( ) Addition  
Name: LOCKLER, KAREN  
Address: 18979 CROOKED LANE  
City-St-Zip: LUTZ, FL 33548

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: KAREN S. LOCKLER

SECR

10/28/2008

Electronic Signature of Signing Officer or Director

Date