

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P99000037363

FILED
Apr 06, 2006
Secretary of State

Entity Name: FRANCES F. STRAWN, P.A.

Current Principal Place of Business:

1000 S ORLANDO AVENUE
A-7
MAITLAND, FL 32751

New Principal Place of Business:

735 YALE ROAD
DELAND, FL 32724

Current Mailing Address:

1000 S ORLANDO AVENUE
A-7
MAITLAND, FL 32751

New Mailing Address:

735 YALE ROAD
DELAND, FL 32724

FEI Number: 59-3577549

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STRAWN, FRANCES F
735 YALE ROAD
DELAND, FL 32724 US

Name and Address of New Registered Agent:

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: FRANCES F STRAWN

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: STRAWN, FRANCES F
Address: 1518 CLOUSER AVENUE
City-St-Zip: ORLANDO, FL 32804

Title: DV () Delete
Name: STRAWN, DAVID U
Address: 1518 CLOUSER AVENUE
City-St-Zip: ORLANDO, FL 32804

Title: DP () Delete
Name: STRAWN, FRANCES F
Address: 735 YALE ROAD
City-St-Zip: DELAND, FL 32724

Title: DV () Delete
Name: STRAWN, DAVID U
Address: 735 YALE ROAD
City-St-Zip: DELAND, FL 32724

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: STRAWN, FRANCES F
Address: 735 YALE ROAD
City-St-Zip: DELAND, FL 32724

Title: DV (X) Change () Addition
Name: STRAWN, DAVID U
Address: 735 YALE ROAD
City-St-Zip: DELAND, FL 32724

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 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: FRANCES F STRAWN

DP

04/06/2006

Electronic Signature of Signing Officer or Director

Date