

# 2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P99000080895

FILED  
Sep 19, 2005  
Secretary of State

Entity Name: FIRST COAST ARRANGEMENTS OF FLORIDA, INC.

## Current Principal Place of Business:

2801 ST JOHNS BLUFF RD.  
#2  
JACKSONVILLE, FL 32246

## New Principal Place of Business:

524 S. 3RD STREET  
UPPER UNIT  
JACKSONVILLE, FL 32250

## Current Mailing Address:

2801 ST JOHNS BLUFF RD.  
#2  
JACKSONVILLE, FL 32246

## New Mailing Address:

14286-19 BEACH BLVD.  
#362  
JACKSONVILLE, FL 32250

FEI Number: 59-3594675

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WOODS, BRANDON  
4456 ROCK RIVER RD W  
JACKSONVILLE, FL 32224 US

## Name and Address of New Registered Agent:

WOODS, BRANDON  
4456 ROCKY RIVER RD W  
JACKSONVILLE, FL 32224 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: BRANDON WOODS

09/19/2005

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: WOODS, BRANDON  
Address: 4456 ROCKY RIVER RD W  
City-St-Zip: JACKSONVILLE, FL 32224

Title: D ( ) Delete  
Name: WOODS, ANN  
Address: 4456 ROCKY RIVER RD W  
City-St-Zip: JACKSONVILLE, FL 32224

## 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: ANN WOODS

D

09/19/2005

Electronic Signature of Signing Officer or Director

Date