

# **2004 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P99000095848

**FILED**  
**Oct 05, 2004**  
**Secretary of State**

**Entity Name:** RAVEN MANAGEMENT CORPORATION

**Current Principal Place of Business:**

101 BAY STREET  
DAYTONA BEACH, FL 32114

**New Principal Place of Business:**

**Current Mailing Address:**

101 BAY STREET  
DAYTONA BEACH, FL 32114

**New Mailing Address:**

**FEI Number:** 59-3616948

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BUTTERS, DAVID  
821 GEORGE HECKER DRIVE  
SOUTH DAYTONA, FL 32119 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

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

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: BUTTERS, DAVID  
Address: 101 BAY STREET  
City-St-Zip: DAYTONA BEACH, FL 32118

Title: VSTD ( ) Delete  
Name: BUTTERS, CLAUDIA  
Address: 101 BAY STREET  
City-St-Zip: DAYTONA BEACH, FL 32118

**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:** DAVID P. BUTTERS

PD

10/05/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date