

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P99000099902

FILED
Oct 05, 2006
Secretary of State

Entity Name: ADVANCED PROPERTY MANAGEMENT SERVICE, INC.

Current Principal Place of Business:

3350 WOODS EDGE CIR., STE 104
BONITA SPRINGS, FL 34134

New Principal Place of Business:

1035 COLLIER CENTER WAY #7
NAPLES, FL 34110

Current Mailing Address:

3350 WOODS EDGE CIR., STE 104
BONITA SPRINGS, FL 34134

New Mailing Address:

1035 COLLIER CENTER WAY #7
NAPLES, FL 34110

FEI Number: 59-3610479

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMPSON, SUSAN L
3350 WOODS EDGE CIR., STE 104
BONITA SPRINGS, FL 34134 US

Name and Address of New Registered Agent:

THOMPSON, SUSAN L
1035 COLLIER CENTER WAY #7
NAPLES, FL 34110 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: SUSAN L. THOMPSON

10/05/2006

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: PT () Delete
Name: THOMPSON, SUSAN L
Address: 37 MENTOR DR
City-St-Zip: NAPLES, FL 34110

Title: VS () Delete
Name: THOMPSON, DARRELL L
Address: 37 MENTOR DR
City-St-Zip: NAPLES, FL 34110

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 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: SUSAN L. THOMPSON

PT

10/05/2006

Electronic Signature of Signing Officer or Director

Date