

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P99000100058

Entity Name: GRUBBS ENTERPRISES INC

FILED  
Nov 23, 2009  
Secretary of State

## Current Principal Place of Business:

4628 S. MOON TRAIL  
PORT ORANGE, FL 32129 US

## New Principal Place of Business:

4628 SOUTH MOON TRAIL  
PORT ORANGE, FL 32129 US

## Current Mailing Address:

4628 S. MOON TRAIL  
PORT ORANGE, FL 32129 US

## New Mailing Address:

4628 SOUTH MOON TRAIL  
PORT ORANGE, FL 32129 US

FEI Number: 59-3609163

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

GRUBBS, TRACY E  
4628 S. MOON TRAIL  
PORT ORANGE, FL 32129 US

## Name and Address of New Registered Agent:

GRUBBS, TRACY E  
4628 SOUTH MOON TRAIL  
PORT ORANGE, FL 32129 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: TRACY E GRUBBS

11/23/2009

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: PTST ( ) Delete  
Name: GRUBBS, TRACY  
Address: 4628 S MOON TRAIL  
City-St-Zip: PORT ORANGE, FL 32129

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTST (X) Change ( ) Addition  
Name: GRUBBS, TRACY  
Address: 4628 SOUTH MOON TRAIL  
City-St-Zip: PORT ORANGE, FL 32129

Title: VP ( ) Change (X) Addition  
Name: SUZANNE, GRUBBS  
Address: 4628 SOUTH MOON TRAIL  
City-St-Zip: PORT ORANGE, FL 32129

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: TRACY E GRUBBS

PTST

11/23/2009

Electronic Signature of Signing Officer or Director

Date