2007 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Jul 18, 2007
Secretary of State

DOCUMENT# P99000106012

Entity Name: DEBRA A. DUBE & ASSOCIATES, P.A.

Current Principal Place of Business:

901 WEST GRANT AVE.
SUITE 1001
LONGWOOD, FL 32750

New Principal Place of Business:

901 WEST WARREN AVE.
SUITE 1001
LONGWOOD, FL 32750

Current Mailing Address:

901 WEST GRANT AVE.
SUITE 1001
LONGWOOD, FL 32750

New Mailing Address:

901 WEST WARREN AVE.
SUITE 1001
LONGWOOD, FL 32750

FEI Number: 59-3614557 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

DUBE, DEBRA A
901 WEST GRANT AVE.
SUITE 1001
LONGWOOD, FL 32750 US

Name and Address of New Registered Agent:

DUBE, DEBRA A
901 WEST WARREN AVE.
SUITE 1001
LONGWOOD, FL 32750 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: DEBRA A. DUBE 07/18/2007
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: OMD ( ) Delete
Name: DUBE, DEBRA A
Address: 901 WEST GRANT AVE.
City-St-Zip: LONGWOOD, FL 32750

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: OMD (X) Change ( ) Addition
Name: DUBE, DEBRA A
Address: 901 WEST WARREN AVE.
City-St-Zip: LONGWOOD, FL 32750

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: DEBRA A. DUBE OMD 07/18/2007
Electronic Signature of Signing Officer or Director Date