

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# V61253

FILED  
Jul 24, 2006  
Secretary of State

Entity Name: W. H. HARMS AND ASSOCIATES, INC.

## Current Principal Place of Business:

4828 N. KINGS HWY  
FORT PIERCE, FL 34951

## New Principal Place of Business:

1592 NE SEAHORSE PLACE  
JENSEN BEACH, FL 34957

## Current Mailing Address:

4828 N. KINGS HWY  
FORT PIERCE, FL 34951

## New Mailing Address:

15129 EAST 13 MILE ROAD  
WARREN, MI 48088

FEI Number: 65-0351880

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

CORNETT, JANE L.  
401 E OSCEOLA ST  
SUITE 102  
STUART, FL 34995 US

## Name and Address of New Registered Agent:

HARMS, WILLIAM H PRES  
1592 NE SEAHORSE PLACE  
JENSEN BEACH, FL 34957 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: WILLIAM H. HARMS

07/24/2006

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: D ( ) Delete  
Name: HARMS, WILLIAM H.,  
Address: 1600 NE DIXIE HWY #6-206  
City-St-Zip: JENSEN BEACH, FL

Title: D ( ) Delete  
Name: QUINLAN, JAMES L.  
Address: 39466 VILLAGE RUN DR.  
City-St-Zip: NORTHVILLE, MI 48167

Title: D ( ) Delete  
Name: QUINLAN, KATHERINE A.  
Address: 39466 VILLAGE RUN DR.  
City-St-Zip: NORTHVILLE, MI 48167

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: HARMS, WILLIAM H  
Address: 1592 NE SEAHORSE PLACE  
City-St-Zip: JENSEN BEACH, FL 34957

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: QUINLAN, KATHERINE . A  
Address: 39466 VILLAGE RUN DR.  
City-St-Zip: NORTHVILLE, MI 48167

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: WILLIAM H. HARMS

D

07/24/2006

Electronic Signature of Signing Officer or Director

Date