

**2019 FLORIDA PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# G00808

**Entity Name:** EMINENT TECHNOLOGY, INC.**Current Principal Place of Business:**% F. BRUCE THIGPEN, III  
225 EAST PALMER ST.  
TALLAHASSEE, FL 32301**Current Mailing Address:**% F. BRUCE THIGPEN, III  
225 EAST PALMER ST.  
TALLAHASSEE, FL 32301**FEI Number:** 59-2235122**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**THIGPEN, F BRUCE  
1427 LEE AVE  
TALLAHASSEE, FL 32303 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:** F BRUCE THIGPEN**06/24/2019**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**Title V  
Name STEWART, WILLIAM L  
Address 818 BAHAMA DRIVE  
City-State-Zip: TALLAHASSEE FLTitle D  
Name BAGWELL, CHARLES C  
Address 4019 ROSCREA DRIVE  
City-State-Zip: TALLAHASSEE FLTitle PT  
Name THIGPEN, BRUCE FIII  
Address 1427 LEE AVE  
City-State-Zip: TALLAHASSEE FL 32303Title D  
Name MUFFLEY, GARY W  
Address 3856 SILVER CHALICE RD  
City-State-Zip: MEMPHIS TNTitle S  
Name STUART, ROBERT B  
Address 1507 BELLEAU WOOD DR.  
City-State-Zip: TALLAHASSEE FL 32312

*I hereby 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 all other like empowered.*

**SIGNATURE:** BRUCE THIGPEN**PRESIDENT****06/24/2019**

Electronic Signature of Signing Officer/Director Detail

Date