

**2007 FOR PROFIT CORPORATION REINSTATEMENT**

**FILED  
Oct 02, 2007  
Secretary of State**

DOCUMENT# P04000068855

Entity Name: JAMES CROFT CORPORATION

**Current Principal Place of Business:**

6325 LUNN RD  
LAKELAND, FL 33811

**New Principal Place of Business:**

5824 PINEDALE LANE  
LAKELAND, FL 33811

**Current Mailing Address:**

P.O.BOX 5282  
LAKELAND, FL 338075282

**New Mailing Address:**

5824 PINEDALE LANE  
LAKELAND, FL 33811

FEI Number: 20-1081651

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WENDEL, JOHN F  
225 EAST LEMON STREET  
351  
LAKELAND, FL 33801 US

**Name and Address of New Registered Agent:**

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: JOHN WENDEL

\_\_\_\_\_  
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: PRES ( ) Delete  
Name: CROFT, JAMES E  
Address: 5824 PINEDALE LANE  
City-St-Zip: LAKELAND, FL 33811 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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: JAMES CROFT

PRES

10/02/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date