

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P08000042323

FILED
Oct 15, 2009
Secretary of State

Entity Name: OVERME DEVELOPMENT, INC.

Current Principal Place of Business:

9641 FULTON AVENUE
HUDSON, FL 34667

New Principal Place of Business:

Current Mailing Address:

9641 FULTON AVENUE
HUDSON, FL 34667

New Mailing Address:

8404 LITTLE RD
NEW PORT RICHEY, FL 34654

FEI Number: 26-2507475

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

O'CONNOR, TARA M ESQ
9743 US HWY 19
PORT RICHEY, FL 34668 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: TARA O'CONNER

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: PD () Delete
Name: MEARES, MICHAEL
Address: 9641 FULTON AVE
City-St-Zip: HUDSON, FL 34667

Title: VD () Delete
Name: MEARES, MICHAEL
Address: 9641 FULTON AVE
City-St-Zip: HUDSON, FL 34667

Title: SD () Delete
Name: VICKERS, LESLIE
Address: 6126 TOWER DRIVE
City-St-Zip: HUDSON, FL 34667

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: TIMOTHY HERNANDEZ

GM

10/15/2009

Electronic Signature of Signing Officer or Director

Date