

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 491686

FILED
Nov 10, 2009
Secretary of State

Entity Name: C. PARENT ENTERPRISE, INC.

Current Principal Place of Business:

P.O. BOX 511148
PUNTA GORDA, FL 33951 US

New Principal Place of Business:

9382 N.W. LOVETT ROAD
GREENVILLE, FL 32331 US

Current Mailing Address:

P.O. BOX 511148
PUNTA GORDA, FL 33951 US

New Mailing Address:

9382 N.W. LOVETT ROAD
GREENVILLE, FL 32331 US

FEI Number: 59-1628465

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PARENT, JANIS
5005 DALEWOOD ST.
PUNTA GORDA, FL 33982 US

Name and Address of New Registered Agent:

PARENT, JANIS
9382 N.W. LOVETT ROAD
GREENVILLE, FL 32331 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: JANIS PARENT

11/10/2009

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: PARENT, CHARLES H
Address: 5005 DALEWOOD ST.
City-St-Zip: PUNTA GORDA, FL

Title: SD () Delete
Name: PARENT, JANIS I
Address: 5005 DALEWOOD ST.
City-St-Zip: PUNTA GORDA, FL

Title: TD () Delete
Name: PARENT, JANIS I
Address: 5005 DALEWOOD ST.
City-St-Zip: PUNTA GORDA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: PARENT, CHARLES H
Address: 9382 N.W. LOVETT ROAD
City-St-Zip: GREENVILLE, FL 32331

Title: SD (X) Change () Addition
Name: PARENT, JANIS I
Address: 9382 N.W. LOVETT ROAD
City-St-Zip: GREENVILLE, FL 32331

Title: TD (X) Change () Addition
Name: PARENT, JANIS I
Address: 9382 N.W. LOVETT ROAD
City-St-Zip: GREENVILLE, FL 32331

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: CHARLES H. PARENT

PD

11/10/2009

Electronic Signature of Signing Officer or Director

Date