

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# F97000003116

**Entity Name:** T & N, INC. OF VOLUSIA COUNTY

**FILED**  
**Apr 19, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

248 S. BEACH ST.  
DAYTONA BEACH, FL 32114

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 705  
DAYTONA BEACH, FL 321150705

**New Mailing Address:**

**FEI Number:** 59-3475897

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LOGUIDICE, JOE  
1515 A RIDGEWOOD AVE  
DAYTONA BEACH, FL 32117 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: JOSEPH LOGUIDICE CPA

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: MINNIG, TIMOTHY  
Address: 248 S. BEACH ST.  
City-St-Zip: DAYTONA BEACH, FL 32114

Title: SDTD  
Name: MINNIG, NANCY  
Address: 248 S. BEACH ST.  
City-St-Zip: DAYTONA BEACH, FL 32114

Title: T  
Name: MINNIG, LISA C  
Address: 2118 S BEACH ST  
City-St-Zip: DAYTONA BEACH, FL 32114

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: TIM MINNIG

P

04/19/2011

Electronic Signature of Signing Officer or Director

Date