

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# G86040

Entity Name: STROLLER COMPANY INC

FILED
Sep 22, 2005
Secretary of State

Current Principal Place of Business:

215 W. JEFFERSON ST.
P.O. BOX 245
QUINCY, FL 32351

New Principal Place of Business:

Current Mailing Address:

215 W. JEFFERSON ST.
P.O. BOX 245
QUINCY, FL 32351

New Mailing Address:

FEI Number: 59-2377038

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RICHMOND, HAROLD S.
215 W. JEFFERSON ST.
QUINCY, FL 32351 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: HAROLD S RICHMOND

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: AS () Delete
Name: BREEDEN, VIRGINIA P.,
Address: RT 4 BOX 166
City-St-Zip: QUINCY, FL

Title: TPD () Delete
Name: SUBER, JOHN W.,
Address: 118 E. KING ST.
City-St-Zip: QUINCY, FL

Title: DVS () Delete
Name: SUBER, W. HARVEY,
Address: 401 FLETCHER DRIVE
City-St-Zip: QUINCY, FL

Title: DVP () Delete
Name: WILLIAM M. SUBEA,
Address: 118 E KING ST
City-St-Zip: QUINCY, FL

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:

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JOHN W SUBER

TPD

09/22/2005

Electronic Signature of Signing Officer or Director

Date