## 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# G95074

C & T OF POLK, INCORPORATED

FILED Apr 18, 2008 Secretary of State

Entity Nar	ne: C&IOF	POLK, INCORPORATED			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	COLN AVE. D, FL 33801				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
P.O. BOX <sup>*</sup> LAKELANI	1693 D, FL 33815				
FEI Number:	59-2457677	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of (	Current Registered Agent:	Name and Address o	Name and Address of New Registered Agent:	
2264 CRYS	RD, MARY J STAL GROVE D, FL 33805	LANE US			
The above in the State	named entity of Florida.	submits this statement for the pu	urpose of changing its registere	d office or registered agent, or both,	
SIGNATUR	RE: MARY CI	RAWFORD			
	Electro	nic Signature of Registered Ager	nt	Date	
		3(2)(b), F.S., the corporation did not g Trust Fund Contribution ( ).	receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P ( BLUNT, CHARI 3018 W ARLIN ORLANDO, FL	GTON AVE.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	CRAWFORD, I	_ GROVE LANE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	VP ( JONES, LUEVI	) Delete NA	Title: Name:	( ) Change ( ) Addition	

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.

Address:

City-St-Zip:

SIGNATURE: MARY CRAWFORD ST 04/18/2008

22697 WESTLAKE DRIVE

MONENO VALLEY, CA 92553

Address:

City-St-Zip: