

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# H00790

Entity Name: BIG O CORPORATION

FILED  
Oct 05, 2009  
Secretary of State

**Current Principal Place of Business:**

609 W. NOBLE AVENUE  
WILLISTON, FL 326962037

**New Principal Place of Business:**

**Current Mailing Address:**

609 W. NOBLE AVENUE  
WILLISTON, FL 326962037

**New Mailing Address:**

FEI Number: 59-2490173

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PHILLIPS, ODIS  
532 NE FIRST AVE  
WILLISTON, FL 32696 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: ODIS PHILLIPS

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: P ( ) Delete  
Name: PHILLIPS, ODIS  
Address: 532 NE FIRST AVE  
City-St-Zip: WILLISTON, FL 32696

Title: VD ( ) Delete  
Name: PHILLIPS, JEFFREY W  
Address: 532 NE FIRST AVE  
City-St-Zip: WILLISTON, FL 32696

Title: D ( ) Delete  
Name: PHILLIPS, STEVE A  
Address: 5323 NE FIRST AVE  
City-St-Zip: WILLISTON, FL 32696

**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: STEVE PHILLIPS

D

10/05/2009

Electronic Signature of Signing Officer or Director

Date