

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# H37973

**FILED
Oct 19, 2004
Secretary of State**

Entity Name: SUMNER/RUSE PROPERTY CORPORATION, INC.

Current Principal Place of Business:

4701 N.E. 36TH AVENUE
OCALA, FL 34479 US

New Principal Place of Business:

500 NE 8TH AVE
OCALA, FL 34470 US

Current Mailing Address:

P.O. BOX 249
OCALA, FL 34478 US

New Mailing Address:

500 NE 8TH AVE
OCALA, FL 34470 US

FEI Number: 59-2483473 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

RUSE, CHARLES, JR.
500 N.E. 8TH AVENUE
OCALA, FL 32670 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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: RUSE, CHARLES, JR.,
Address: 500 N.E. 8TH AVE.
City-St-Zip: Ocala, FL

Title: DP () Delete
Name: SUMNER, SCOTT,
Address: 500 NE 8TH AVE
City-St-Zip: Ocala, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: CHARLES RUSE, JR

VP

10/19/2004

Electronic Signature of Signing Officer or Director

_____ Date