

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# J52528

FILED
Nov 09, 2009
Secretary of State

Entity Name: KENNETH & CELIA LAVALLEE, INC.

Current Principal Place of Business:

13540 N. FLORIDA AVE.
202D
TAMPA, FL 33613 US

New Principal Place of Business:

13542 N. FLORIDA AVE.
214
TAMPA, FL 33613 US

Current Mailing Address:

PO BOX 17915
TAMPA, FL 33682 US

New Mailing Address:

FEI Number: 59-2756851 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAVALLEE, CELIA C
504 JUSTICE DRIVE
TAMPA, FL 33613 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: CELIA C LAVALLEE

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: SD (X) Delete
Name: LAVALLEE, KENNETH N.
Address: 504 JUSTICE DRIVE
City-St-Zip: TAMPA, FL 33614

Title: PD () Delete
Name: LAVALLEE, CELIA C.
Address: 504 JUSTICE DRIVE
City-St-Zip: TAMPA, FL 33613

Title: D () Delete
Name: LAVALLEE, KENNETH N JR
Address: 1218 MAGDALENE GROVE AVE
City-St-Zip: TAMPA, FL 33613

Title: VP () Delete
Name: LAVALLEE, BRENT G
Address: PO BOX 17915
City-St-Zip: TAMPA, FL 33682

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 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: CELIA C LAVALLEE

Electronic Signature of Signing Officer or Director

PD

11/09/2009

Date