


# 2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # L29037		
1. Entity Name APEX FENCE CO. OF SPRING HILL, INC.		

Principal Place of Business 16710 US HWY 41 SPRING HILL, FL 34610 US	Mailing Address 16710 US HWY 41 SPRING HILL, FL 34610 US
--	--

2. Principal Place of Business  Suite, Apt. #, etc.	3. Mailing Address  Suite, Apt. #, etc.
---	---

City & State  Zip	City & State  Zip	Country	Country
-------------------------	-------------------------	---------	---------

FILED  
05 FEB 14 AM 9:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



02082005 REIN-P CR2E098 (6/04)

6. Name and Address of Current Registered Agent  BIDETTI, PAUL 16710 US HWY 41 SPRING HILL, FL 34610		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
--	--	--	--

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$900.00</b>	
------------------------------------	--

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BIDETTI, PAUL 16710 US HWY 41 SPRING HILL, FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 500046904395 02/21/05--01011--022 **300.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Paul Bidetti 2/11/05 352-683-1892  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

# **APEX Fence Company**

16710 U.S. Highway 41  
Spring Hill, Florida 34610  
Phone & Fax # (352) 683-1893

---

Feb. 11, 2005

Florida Dept. of State

Please be advised that I did not  
receive 2004 Fictitious Name-Profit  
Corporation Reinstatement form.

As per your office- Late fees, etc.,  
waived and, find \$300.00 Check for  
same for years 2004-2005.

If there is any additional information  
required, please advise.

Thank You.

Sincerely,

*Paul Bidetti*

Paul Bidetti  
APEX Fence Company