APPLICATION FOR EINSTATEMENT CUMENT # L47242 Apporation Name SIGNER HOMES, INC.	FLORIDA DEPA Kathe Secret DIVISION O 2 Mailing Address PO BOX 586 228 N. 6TH AVE WAUCHULA FL 33873 US	FIONS BEFORE ARTMENT OF STA erine Harris tary of State F CORPORATIONS POR 1985	ECOMPLETING THIS FORM. FILED 00 DEC 26 AM ID: 15 SECRETARY OF STATE TALLAHASSEE FLORIDA	
APPLICATION FOR EINSTATEMENT CUMENT: # L47242 irporation Name SIGNER HOMES, INC. pal Place of Business EXX 586 N. 67H AVE CHULA FL 33873	FLORIDA DEPA Kathe Secret DIVISION O 2 Mailing Address PO BOX 586 228 N. 6TH AVE WAUCHULA FL 33873 US	ARTMENT OF STA erine Harris tary of State of Corporations	FILED 00 DEC 26 AN ID: 15 SECRETARY OF STATE TALLAHASSEE FLORIDA	
CUMENT # L47242 COUMENT # L47	Mading Address PO BOX 586 228 N. 6TH AVE WAUCHULA FL 33873 US	F CORPORATIONS	SECRETARY OF STATE TALLAHASSEE FLORIDA	
CUMENT: # L47242 imporation Name SIGNER HOMES, INC. pal Place of Business EXX 586 N. 6TH AVE CHULA FL 33873	Mailing Address PO BOX 586 228 N. 6TH AVE WAUCHULA FL 33873 US	We life	SECRETARY OF STATE TALLAHASSEE FLORIDA	
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CHULA FL 33873	WAUCHULA FL 33873 US		- [
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	- الماسيد ماكيدة المرسول والمراجع	and only personal as he is	REINSTATEMENT (2)	
	3. New Mailing Office		Date Incorporated or Qualified	
bite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. City & State			To Oo Business in Florida 01/29/1990 5. FEI Number Applied For Not	
S. C.	Zip	Country	6. S8 75 Additional Fee requirem	
	7 ()	<u> </u>	for a Certificate of Status	
mes and Street Addresses of Each Officer and/or Name of Officers	Director (Florida nonpr	ofil corporations must list a Street Address of		
le(s) and/or Directors		Officer and/or Dire	octor City / State / Zip	
LIBBY, STEPHEN E, II	PO BO	X 1355	LEICESTER NC 28748	
CO LIBBY, CASEY FILES SES		X 1355	LEICESTER NC 28748	
NSTATEMENT STATE		Substitute River	149	
A The Paris Contract		N. 6, 1	900003523809-	
			-01/04/010109701	
			****750.00 ****750	
B. Name and Address of Current Des	Notare d A - and			
B. Name and Address of Current Rag	perereu Ayent	Name	Name and Address of New Registered Agent	
TEPHEN, LIBBY E		Street Address	ss (P.O. Box Number is Not Acceptable)	
28 N. 6TH AVE		Suite, Apt. #,		
AUCHULA FL 33873		<u> </u>		
11		City	State Zip Code	
peing appointed the indistered agent of the above r	named curporation, arn	familiar with and accept th	e obligations of Section 607.0505, F.S.	
are of street Agent 5			Date 12-20-00	
REGIS	STERED AGENT MUST	SIGN		
rify that I am an officer or director or the receiver	or trustee empowered t	execute this application a	as provided for in chapter 607 or 617, F.S. I further certify that when filing	
od by the corporation have been paid and the name	es of individuals listed (on this form do not qualify.	les the requirements of section 607,0401 or 617,0401, F.S., that all fees for an exemption under section 119 07(3)(i), F.S. The information indicated	
this application is true and accurate, and my signati	ure snau have the same	a legal effect as if made un	rder gath.	
· / \ . /	1 u		1/1-	
IATURE:	\mathcal{L}		12-20-00 8286839886	
STEPHEN E. LI		ICER OR DIRECTOR	Date Daytime Phone #	

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