

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P00000000803

1. Entity Name
TSW CONVERSIONS, INC.



FILED

04 NOV 16 AM 11:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
4 FAIRFAX CT.
PALM COAST, FL 32164

Mailing Address
138 PALM COAST PARKWAY N.E.
SUITE 345
PALM COAST, FL 32137

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



REINSTATEMENT 2004
1/11/2004 REINSTATEMENT CR2E098 (6/04) 2004

4. FEI Number
59-3614336

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WALENZA, STANLEY J
4 FAIRFAX COURT
PALM COAST, FL 32164

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: Stanley J. Walenza STANLEY J. WALENZA

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

11/11/04

FILE NOW!!! FEE IS \$750.00
After January 1, 2005, Fee will be \$900.00

10. OFFICERS AND DIRECTORS

TITLE P
NAME WALENZA, STANLEY
STREET ADDRESS 4 FAIRFAX CT.
CITY-ST-ZIP PALM COAST, FL 32164

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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
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STREET ADDRESS
CITY-ST-ZIP
900042766569
11/16/04--01017--018 **150.00

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CITY-ST-ZIP

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: Stanley Walenza STANLEY WALENZA 11/11/04 386-446-1549

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

283
Nov. 11, 2004

To Whom It May Concern:

I am writing you in reference to waive my late fee for reinstatement of the corporation. It has not been a good year.

I had to leave in late March to handle some family health matters and was unable to return till Nov. 2nd election day.

My understanding was that the accountant would handle all the paper work during my absence. When I came back to all the mail & found out the accountant had passed away. I did not know where to turn so I called the Division of Corporations and here I am.

Between my family's health problems & water damage due to the Hurricane I don't need help to put me out of business. So I am asking you to please waive the penalty on my reinstatement.

Yours Truly,
Stanley J. Valenza
T.S.W. Conversions Inc.
FEE - 59-3614-336