

# 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P000Q0048030

1. Entity Name  
KIN INVESTORS, INC.



FILED

08 JAN -3 AM 7:59

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business  
20788 BANTAMS ROOST  
ESTERO, FL 33928

Mailing Address  
20788 BANTAMS ROOST  
ESTERO, FL 33928



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

10162007

REIN-P

CR2E098 (1/07)

4. FEI Number  
65-1012985

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BARKER, PATRICIA  
20788 BANTAMS ROOST  
ESTERO, FL 33928

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

FILE NOW!!! FEE IS \$750.00  
After January 1, 2008, Fee will be \$900.00

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
BARKER, PATRICIA A MRS  
PO BOX 848  
ESTERO, FL 33928 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition  
300111450283  
10-28-07 01:45:00

TITLE  
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☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

*Patricia A. Barker*

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