

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P00000105846

FILED
Oct 26, 2004
Secretary of State

Entity Name: SUNCOAST TILE OF HERNANDO, INC.

Current Principal Place of Business:

4117 LAMSON AVE
SPRING HILL, FL 34608

New Principal Place of Business:

Current Mailing Address:

4117 LAMSON AVE
SPRING HILL, FL 34608

New Mailing Address:

FEI Number: 59-3713090

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COAKLEY, SCOTT A
12157 BUCKINGHAMWAY
BROOKSVILLE, FL 34609 US

Name and Address of New Registered Agent:

COAKLEY, SCOTT A
4117 LAMSON AVENUE
SPRING HILL, FL 34608 US

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: SCOTT A. COAKLEY

10/26/2004

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: D () Delete
Name: COAKLEY, SCOTT A
Address: 12157 BUCKINGHAM WAY
City-St-Zip: SPRING HILL, FL 34609

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: COAKLEY, SCOTT A
Address: 4117 LAMSON AVENUE
City-St-Zip: SPRING HILL, FL 34608 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SCOTT A. COAKLEY

D

10/26/2004

Electronic Signature of Signing Officer or Director

Date