


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

03 MAR 26 PM 1:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

01503 UBR

DOCUMENT # P00000115023

1. Corporation Name
Shad Sanders Painting, Inc.

2. Principal Office Address
1323 NE 34th Street
Suite, Apt. #, etc.

3. Mailing Office Address
PO BOX 2438
Suite, Apt. #, etc.

5/5/03 91928025150.00

City & State
Ocala Florida
Zip Country
34479 manion

City & State
Silver Springs FL
Zip Country
34489 manion

4. Date Incorporated or Qualified To Do Business in Florida 1-1-01

5. FEI Number 59-3689455 Applied For Not Applicable

6. CERTIFICATE OF STATUS DESIRED \$9.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name Shad Sanders

600014695626

Street Address (P.O. Box Number is Not Acceptable)
1323 NE 34th ST

03/26/03--01006--017 **300.00

Suite, Apt. #, Etc.

City Ocala

State Zip Code
FL 34479

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent *[Signature]*
REGISTERED AGENT MUST SIGN

Date 3/19/03

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
Pres	Shad Sanders	1323 NE 34th Street	Ocala Florida 34479

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(l), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date 3/19/03
Daytime Phone #

CR2E081 (10/02)

27 3/21

Shad Sanders Painting, Inc.
PO BOX 2438
Silver Springs, FL 34489-2438
352-351-9240
Fax 352-732-3380

March 19, 2003

To who this may concern:

The business was initially incorporated with the State on January 1st, 2001. When we prepared our 2001 Corporation taxes in March of 2002, our CPA asked for proof of the Corporation and was provided to her. However, we were not aware of the annual Corporation renewal fees. When preparing for 2002 Corporation taxes, our CPA informed us that we did not renew for 2002.

I then contacted the Department of State to discuss this issue. The lady I spoke with informed us that a renewal notification form was returned to your office. The business was moved in March of 2001 from 3833 NE 4th Street, Ocala, FL 34470 to 1823 NE 34th Street, Ocala, FL 34479 with a mailing address of PO BOX 2438, Silver Springs, FL 34489-2438. I am not sure when the notifications were issued, but chances are it was not forwarded to the new address.

Please make the necessary address changes to the PO BOX 2438, Silver Springs, and FL 34489-2438 to assure receipt of mail.

Enclosed is a check in the amount of \$300 to cover 2002 and 2003 Corporation fees. I apologize for the inconvenience.

Thank You in Advance,


Shad Sanders
Shad Sanders Painting, Inc.