

# 2004 FOR PROFIT CORPORATION REINSTATEMENT

FILED  
Dec 13, 2004  
Secretary of State

DOCUMENT# P01000109996

Entity Name: STAMBAUGH, INC.

**Current Principal Place of Business:**

1603 LAREDO STREET  
PALM CITY, FL 34990

**New Principal Place of Business:**

634 INDIAN KEY DR  
PORT ST. LUCIE, FL 34986

**Current Mailing Address:**

POST OFFICE BOX 31026  
PALM BEACH GARDENS, FL 334201026

**New Mailing Address:**

634 INDIAN KEY DRIVE  
PORT ST. LUCIE, FL 34986

FEI Number: 65-1155659

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

**Name and Address of New Registered Agent:**

STAMBAUGH, TY C PD  
634 INDIAN KEY DR  
PORT ST. LUCIE, FL 34986 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: TY C. STAMBAUGH

12/13/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: STAMBAUGH, TAUL L  
Address: 1603 LAREDO STREET  
City-St-Zip: PALM CITY, FL 34990

Title: VD ( ) Delete  
Name: STAMBAUGH, TY C  
Address: 1603 LAREDO STREET  
City-St-Zip: PALM CITY, FL 34990

Title: STD (X) Delete  
Name: STAMBAUGH, TROY R  
Address: 1603 LAREDO STREET  
City-St-Zip: PALM CITY, FL 34990

Title: D (X) Delete  
Name: STAMBAUGH, HAROLD B  
Address: 1603 LAREDO STREET  
City-St-Zip: PALM CITY, FL 34990

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: STAMBAUGH, TY C  
Address: 634 INDIAN KEY DR  
City-St-Zip: PORT ST. LUCIE, FL 34986

Title: STD (X) Change ( ) Addition  
Name: STAMBAUGH, TAUN L  
Address: 634 INDIAN KEY DR  
City-St-Zip: PORT ST. LUCIE, FL 34986

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: TY C. STAMBAUGH

PD

12/13/2004

Electronic Signature of Signing Officer or Director

Date