

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P02000002734

1. Entity Name
STAN SHELNUK CONSTRUCTION, INC.



Principal Place of Business

901 ROYALTON ROAD
ORLANDO, FL 32825

Mailing Address

901 ROYALTON ROAD
ORLANDO, FL 32825

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

10112004

REIN-P

CR2E098 (6/04)

4. FEI Number

42-1534699

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

STAN SHELNUK
901 ROYALTON RD.
ORLANDO, FL 32825

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, 2005, 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
DP
SHELNUK, STAN A
901 ROYALTON ROAD
ORLANDO, FL 32825 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition
200042828592
11/17/04--01028--012 ***150.00

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
SHELNUK, THERESA A
901 ROYALTON RD.
ORLANDO, FL 32825 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

APPROVED
AND
FILED

04 DEC 22 PM 2:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT



TR

10-26-04

PS 2 12

Stan Shelnutt Construction Inc
901 Royalton Rd
Orlando, FL 32825

October 25, 2004


Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Dear Sirs:

We are in the hurricane effected area. Please reinstate the corporation document #P02000002734. I have enclosed the application for reinstatement and \$150 filing fee.

Please waive the late filing fee. I did not realize the application would be a postcard. I was looking for the green application.

Sincerely,


Stan Shelnutt

I don't remember receiving the postcard.