

# **2009 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P02000059543

Entity Name: AARON SIMQUE HOMES, INC.

**FILED**  
**Nov 20, 2009**  
**Secretary of State**

**Current Principal Place of Business:**

426 SW COMMERCE DRIVE STE. 130  
LAKE CITY, FL 32025

**New Principal Place of Business:**

313 SW NIGHTSHADE DR  
LAKE CITY, FL 32024

**Current Mailing Address:**

426 SW COMMERCE DRIVE STE. 130  
LAKE CITY, FL 32025

**New Mailing Address:**

313 SW NIGHTSHADE DR  
LAKE CITY, FL 32024

FEI Number: 30-0084607

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SIMQUE, AARON  
313 SW NIGHTSHADE DR  
LAKE CITY, FL 32024 US

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

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: AARON SIMQUE

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: P ( ) Delete  
Name: SIMQUE, AARON  
Address: 313 SW NIGHTSHADE DR  
City-St-Zip: LAKE CITY, FL 32024

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: AARON SIMQUE

MR

11/20/2009

Electronic Signature of Signing Officer or Director

Date