

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

*REINSTATEMENT*  
*2009 + 2010*

DOCUMENT # P02000081819

1. Corporation Name

OVERHEAD GARAGE DOOR SERVICES, INC

2. Principal Office Address - No P.O. Box #

10975 SAN DIEGO MISSION ROAD

3. Mailing Office Address

PO BOX 15067

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

SAN DIEGO, CA

City & State

SAN DIEGO, CA

Zip

92108

Country

USA

Zip

92175

Country

USA

4. Date Incorporated or Qualified  
To Do Business in Florida

07/29/2002

5. FEI Number  
51-0417586

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required  
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

MARLENE STEPHENS

Street Address (P.O. Box Number is Not Acceptable)

9951 ATLANTIC BLVD

Suite, Apt. #, Etc.

210

City

JACKSONVILLE

State

FL

Zip Code

32250

200183319652  
07/15/10--01002--022 \*\*908.75

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

*Marlene A. Stephens*

Date 07/06/2010

REGISTERED AGENT MUST SIGN

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

| Titles  | Name of<br>Officers and/or Directors | Street Address of Each<br>Officer and/or Director | City / State / Zip        |
|---------|--------------------------------------|---|---------------------------|
| P/D/S/T | MARLENE STEPHENS                     | 9951 ATLANTIC BLVD #210                           | JACKSONVILLE / FL / 32250 |
|         |                                      |   |                           |
|         |                                      |   |                           |
|         |                                      |   |                           |
|         |                                      |   |                           |
|         |                                      |   |                           |

10. E-mail Address: DVANWINKLE@GARAGEDOORSERVICE.BIZ

(To be used for future annual report notification)

11. 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. I further certify, 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:

*Marlene A. Stephens*

07/06/2010 619-641-7637

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #