

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 NOV -4 PM 3:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000088460

1. Corporation Name
Value Roofing, Inc.

540 Hwy 17 South
540 Hwy 17 South

2. Principal Office Address
540 Hwy 17 South

Suite, Apt. #, etc.

City & State
Eagle Lake, Florida

Zip
33839

Country
Polk

3. Mailing Office Address
540 Hwy 17 South

Suite, Apt. #, etc.

City & State
Eagle Lake, Florida

Zip
33839

Country
Polk

**4. Date Incorporated or Qualified
To Do Business in Florida** 8/15/2002

5. FEI Number
76-0708761

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
kevin J. Guenther

Street Address (P.O. Box Number is Not Acceptable)
540 Hwy 17 South

Suite, Apt. #, Etc.

City
Eagle Lake

State
FL

Zip Code
33839

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**

K-J Guenther

REGISTERED AGENT MUST SIGN

Date Nov 2, 04

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
P	Kevin J. Guenther	540 Hwy 17 South	Eagle Lake, Florida 33839
V	Teresa W. Guenther	540 Hwy 17 South	Eagle Lake, Florida 33839

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)(i), 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:

K-J Guenther

Kevin J. Guenther

Date

Nov 2, 04

Daytime Phone #

8632871358

CR2E081 (01/04)