

# **2014 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P02000090368

**Entity Name:** PALISADES BUILDERS, INC.

**FILED**  
**Nov 04, 2014**  
**Secretary of State**

**Current Principal Place of Business:**

9617 SPRING LAKE DRIVE  
CLERMONT, FL 34711

**New Principal Place of Business:**

**Current Mailing Address:**

9617 SPRING LAKE DRIVE  
CLERMONT, FL 34711

**New Mailing Address:**

**FEI Number:** 11-3647742

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LIBERNINI, TED  
9617 SPRING LAKE DRIVE  
CLERMONT, FL 34711 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: TED LIBERNINI

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: EDER, KELVIN  
Address: 8979 ALEGRE CIR  
City-St-Zip: ORLANDO, FL 32836

Title: D  
Name: LIBERNINI, TED  
Address: 9836 SPRING LAKE DRIVE  
City-St-Zip: CLERMONT, FL 34711

I hereby 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 all other like empowered.

SIGNATURE: TED LIBERNINI

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

D.

11/04/2014

\_\_\_\_\_  
Date