

# 2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000111001

Entity Name: S & T OF N. W. FLORIDA, INC.

FILED  
Oct 11, 2004  
Secretary of State

## Current Principal Place of Business:

306 REYNOLDS AVE  
NICEVILLE, FL 32578

## New Principal Place of Business:

405 MONETTE AVE  
NICEVILLE, FL 32578

## Current Mailing Address:

306 REYNOLDS AVE  
NICEVILLE, FL 32578

## New Mailing Address:

405 MONETTE AVE  
NICEVILLE, FL 32578

FEI Number: 45-0489382

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CARROLL, SPENCE II  
306 REYNOLDS AVE  
NICEVILLE, FL 32578 US

## Name and Address of New Registered Agent:

CARROLL, SPENCE II  
405 MONETTE AVE  
NICEVILLE, FL 32578 US

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: SPENCE CARROLL

10/11/2004

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: D ( ) Delete  
Name: CARROLL, SPENCE II  
Address: 306 REYNOLDS AVE  
City-St-Zip: NICEVILLE, FL 32578

Title: D ( ) Delete  
Name: MATON, RALPH  
Address: 205 MARGUETTE ST APT C  
City-St-Zip: NICEVILLE, FL 32578

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: CARROLL, SPENCE II  
Address: 405 MONETTE AVE  
City-St-Zip: NICEVILLE, FL 32578

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SPENCE CARROLL

PRES

10/11/2004

Electronic Signature of Signing Officer or Director

Date