

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000118734

FILED
Feb 06, 2009
Secretary of State

Entity Name: CALVIN ROBINSON REPAIR & MAINTENANCE, INC.

Current Principal Place of Business:

845 RANCH RD
QUINCY, FL 32351

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 20375
TALLAHASSEE, FL 32316

New Mailing Address:

FEI Number: 02-0653665

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBINSON, CLAVIN
845 RANCH RD
QUINCY, FL 32351 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: CALVIN ROBINSON

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: ROBINSON, CALVIN
Address: 845 RANCH RD
City-St-Zip: QUINCY, FL 32351

Title: V () Delete
Name: ROBINSON, DEANN
Address: 845 RANCH RD
City-St-Zip: QUINCY, FL 32351

Title: S () Delete
Name: HANNA, DAVID
Address: 39 SIOUX CIR.
City-St-Zip: HAVANNA, FL 32333

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change () Addition
Name: ROBINSON, DEANN
Address: 845 RANCH RD
City-St-Zip: QUINCY, FL 32351

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: CALVIN ROBINSON

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02/06/2009

Electronic Signature of Signing Officer or Director

Date