

# **2013 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P03000066808

**FILED**  
**Sep 11, 2013**  
**Secretary of State**

**Entity Name:** CASSEY NORRIS PAINTING , INC.

**Current Principal Place of Business:**

824 SEMINOLE BLVD.  
TARPON SPRINGS, FL 34689

**New Principal Place of Business:**

**Current Mailing Address:**

824 SEMINOLE BLVD.  
TARPON SPRINGS, FL 34689

**New Mailing Address:**

**FEI Number:** 20-0157473

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NORRIS, CASSEY A  
824 SEMINOLE BLVD.  
TARPON SPRINGS, FL 34689 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:** CASSEY NORRIS

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

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** NORRIS, CASSEY A  
**Address:** 824 SEMINOLE BLVD.  
**City-St-Zip:** TARPON SPRINGS, FL 34689

**Title:** VP  
**Name:** NORRIS, KIMBERLY D  
**Address:** 824 SEMINOLE BLVD.  
**City-St-Zip:** TARPON SPRINGS, FL 34689

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:** CASSEY NORRIS

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

PRES

09/11/2013

\_\_\_\_\_  
Date