

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000072493

Entity Name: EXQUISITE FALLS, INC

FILED  
Aug 09, 2009  
Secretary of State

## Current Principal Place of Business:

3816 BRANDEIS AVENUE  
ORLANDO, FL 32839

## New Principal Place of Business:

## Current Mailing Address:

3816 BRANDEIS AVENUE  
ORLANDO, FL 32839 US

## New Mailing Address:

3816 BRANDEIS AVENUE  
ORLANDO, FL 32839

FEI Number: 20-0066337

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ACCOUNTING AND COMPUTER SERVICES  
4130 MAPLEGROVE DRIVE  
ORLANDO, FL 32818 US

## Name and Address of New Registered Agent:

ACCOUNTING AND COMPUTER SERVICES  
582 PALIO COURT  
OCOE, FL 34761 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: PHILIP A. SCANTLEBURY

08/09/2009

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: SHAW, ANTON C  
Address: 3816 BRANDEIS AVENUE  
City-St-Zip: ORLANDO, FL 32839 US

Title: VP ( ) Delete  
Name: SHAW, PAULA L  
Address: 3816 BRANDEIS AVENUE  
City-St-Zip: ORLANDO, FL 32839 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: ANTON C. SHAW

OWNE

08/09/2009

Electronic Signature of Signing Officer or Director

Date