

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P03000104337

**Entity Name:** N.F. FRANZ SERVICES, INC.

**FILED**  
**Feb 23, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

234 LAKE THOMAS DRIVE  
WINTER HAVEN, FL 33880

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 90486  
LAKELAND, FL 33804

**New Mailing Address:**

**FEI Number:** 58-2677969

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ARTMAN, STEPHEN H ESQ.  
925 SOUTH FLORIDA AVENUE  
LAKELAND, FL 33803 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: STEPHEN H. ARTMAN

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

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: FRANZ, DARREN A  
Address: 234 LAKE THOMAS DRIVE  
City-St-Zip: WINTER HAVEN, FL 33880

Title: VPD  
Name: FRANZ, MICHELLE L  
Address: 234 LAKE THOMAS DRIVE  
City-St-Zip: WINTER HAVEN, FL 33880

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: MICHELLE L. FRANZ

VPD

02/23/2011

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

\_\_\_\_\_  
Date