

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P03000114515

**FILED**  
**Sep 27, 2011**  
**Secretary of State**

**Entity Name:** WILLIE FARMER SUPERIOR CLEANING INC

**Current Principal Place of Business:**

1845 GILLESPIE AVE  
SARASOTA, FL 34234 US

**New Principal Place of Business:**

**Current Mailing Address:**

1845 GILLESPIE AVE  
SARASOTA, FL 34234 US

**New Mailing Address:**

**FEI Number:** 20-0311565

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FARMER, WILLIE  
1845 GILLESPIE AVE  
SARASOTA, FL 34234 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:** WILLIE FARMER

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

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** FARMER, WILLIE  
**Address:** 1845 GILLESPIE AVE  
**City-St-Zip:** SARASOTA, FL 34234 US

**Title:** VPD  
**Name:** FARMER, BETTY  
**Address:** 1845 GILLESPIE AVE  
**City-St-Zip:** SARASOTA, FL 34234 US

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:** WILLIE FARMER

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

PD

09/27/2011

\_\_\_\_\_  
Date