

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000114986

FILED
Oct 21, 2004
Secretary of State

Entity Name: ASSISTANCE IN DEMAND ENTERPRISES, INC.

Current Principal Place of Business:

4443 TIDAL POND ROAD
NEW PORT RICHEY, FL 34652

New Principal Place of Business:

Current Mailing Address:

4443 TIDAL POND ROAD
NEW PORT RICHEY, FL 34652

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SKELTON, DANIEL T
4443 TIDAL POND ROAD
NEW PORT RICHEY, FL 34652 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:

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: CEO () Delete
Name: SKELTON, DANIEL T
Address: 4443 TIDAL POND ROAD
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: P () Delete
Name: PRICE, WARD D
Address: 8335 BROKEN WILLOW LANE
City-St-Zip: PORT RICHEY, FL 34668

Title: V () Delete
Name: SKELTON, DANIEL J
Address: 4553 WEASEL DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: T () Delete
Name: DAVIS, GLENN H
Address: 4439 TIDAL POND ROAD
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: S () Delete
Name: SKELTON, HEATHER N
Address: 4553 WEASEL DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34653

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 for the exemption stated in Section 119.07(3)(i), 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: DANIEL T. SKELTON

CEO

10/21/2004

Electronic Signature of Signing Officer or Director

Date