

# 2013 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000121586

**FILED**  
**Oct 08, 2013**  
**Secretary of State**

**Entity Name:** REESE CASON, INC.

**Current Principal Place of Business:**

713 E MISSOURI AVE  
WILDWOOD, FL 34785

**New Principal Place of Business:**

**Current Mailing Address:**

713 E MISSOURI AVE  
WILDWOOD, FL 34785

**New Mailing Address:**

FEI Number: 56-2410979

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MARCHBANKS, LAWRENCE J  
110 CLEVELAND AVE  
WILDWOOD, FL 34785 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: DANIEL REESE CASON

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

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: CASON, DANIEL REESE  
Address: 713 E MISSOURI AVE  
City-St-Zip: WILDWOOD, FL 34785

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: DANIEL REESE CASON

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

OWNE

10/08/2013

\_\_\_\_\_  
Date