


2004 FOR PROFIT CORPORATION REINSTATEMENT

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FILED

04 NOV -1 PM 12:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P03000131196	
1. Entity Name F & L ROGERS INCORPORATED	

Principal Place of Business 6251 WHITAKER RD NAPLES, FL 34112	Mailing Address 6251 WHITAKER RD NAPLES, FL 34112
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2. Principal Place of Business Suite, Apt. #, etc. City & State Zip	3. Mailing Address Suite, Apt. #, etc. City & State Zip
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REINSTATEMENT

4. FEI Number 743109265	Applied For <input checked="" type="checkbox"/> Yes <input type="checkbox"/> Not Applicable
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6. Name and Address of Current Registered Agent ROGERS, FREDERIC W 6251 WHITAKER RD NAPLES, FL 34112	
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7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u>Frederic W. Rogers</u> <u>Fred Rogers</u> DATE <u>Oct. 29/04</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required upon reinstating)</small>	

FILE NOW!! FEE IS \$750.00 After January 1, 2005, Fee will be \$900.00

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ROGERS, FREDERIC W 6251 WHITAKER RD NAPLES, FL 34112 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 200042352042 11/01/04--01048--008 **158.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V ROGERS, LYNN D 6251 WHITAKER RD NAPLES, FL 34112 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.	
SIGNATURE: <u>Lynn D Rogers</u> <u>Lynn D. Rogers</u> DATE <u>Oct 29/04</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<small>Daytime Phone #</small>

239-793-2064

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Oct. 29/04

To whom it may Concern,

I am writing to let you know, that we were out of the country for the summer and returned to Florida on Oct. 22, 2004.

Upon our return was a notice stating that our Incorporated company was dissolved. I never recieved any forms or papers about having to file our 2004 annual report. I do not know what is needed to file, as the company has not recieved or made any money as yet.

We would like to be reinstated and just pay the ³150⁰⁰ filing fee and not the sume of ⁵750⁰⁰. Hope this is to your satisfaction.

Sincerely

Lynn Rogers
Vice President
E & P Rogers Inc.