

# 2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P03000134438

1. Entity Name  
HILL'S PLASTER, STUCCO & PAINT, INC.



FILED

04 OCT 29 PM 1:01

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business  
205 OLD MILL POND ROAD  
PALM HARBOR, FL 34683

Mailing Address  
205 OLD MILL POND ROAD  
PALM HARBOR, FL 34683

2. Principal Place of Business

205 OLD MILL POND RD.

3. Mailing Address

205 OLD MILL POND RD

Suite, Apt. #, etc.

Suite, Apt. #, etc.



10212004

REIN-P

CR2E098 (6/04)

City & State

PALM HARBOR FL.

City & State

PALM HARBOR FL

4. FEI Number

80-0082831

Applied For

Not Applicable

Zip

34683

Country

FLORIDA

Zip

34683

Country

FLORIDA

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HILL, JOHN R  
205 OLD MILL POND ROAD  
PALM HARBOR, FL 34683

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete  
NAME HILL, JOHN R  
STREET ADDRESS 205 OLD MILL POND ROAD  
CITY-ST-ZIP PALM HARBOR, FL 34683

TITLE VP ☐ Delete  
NAME JOHN R HILL JR.  
STREET ADDRESS 1360 ABERLEA EAST  
CITY-ST-ZIP DUNEDIN FL. 34698

TITLE VP - SECY ☐ Delete  
NAME STEVEN A. HILL  
STREET ADDRESS 809 JEFFORD ST  
CITY-ST-ZIP CLEARWATER, FL 33766

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS 900042313709  
CITY-ST-ZIP 10/29/04--01052--002 \*\*\*750.00

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

John R. Hill Jr.

JOHN R. HILL JR

10/26-04 727 937-9227

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #