

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000003311

FILED
Mar 29, 2005
Secretary of State

Entity Name: TIMOTHY STEPHENS CARPET INSTALLATION, INC.

Current Principal Place of Business:

122 GARDEN AVE
FORT PIERCE, FL 34982 US

New Principal Place of Business:

400 JENKINS RD
400-103
FORT PIERCE, FL 34982 US

Current Mailing Address:

122 GARDEN AVE
FORT PIERCE, FL 34982 US

New Mailing Address:

400 JENKINS RD
400-103
FORT PIERCE, FL 34982 US

FEI Number: 20-0564310

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ACCESS ACCOUNTING INC
432 SW LAKEHURST DR
PORT SAINT LUCIE, FL 349832825 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: ACCESS ACCOUNTING INC

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: DIR () Delete
Name: STEPHENS, TIMOTHY H
Address: 122 GARDEN AVE
City-St-Zip: FORT PIERCE, FL 34982 US

Title: PT () Delete
Name: STEPHENS, TIMOTHY H
Address: 122 GARDEN AVE
City-St-Zip: FORT PIERCE, FL 34982 US

Title: S () Delete
Name: STEPHENS, TOMMIE
Address: 1518 CORTEZ BLVD
City-St-Zip: FORT PIERCE, FL 34982 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIR (X) Change () Addition
Name: STEPHENS, TIMOTHY H
Address: 400 JENKINS RD 400-103
City-St-Zip: FORT PIERCE, FL 34982 US

Title: PT (X) Change () Addition
Name: STEPHENS, TIMOTHY H
Address: 400 JENKINS RD 400-103
City-St-Zip: FORT PIERCE, FL 34982 US

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: TIMOTHY STEPHENS

DIR

03/29/2005

Electronic Signature of Signing Officer or Director

Date