## 2006 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P04000009359

Entity Name: FNLJ INC.

FILED Oct 05, 2006 Secretary of State

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
311 S. OSCEOLA AVE INVERNESS, FL 34452					
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
311 S. OSCEOLA AVE INVERNESS, FL 34452					
FEI Number: 34-1984703 FEI Number Applied For ( ) FEI Num			El Number Not Applicable()	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
NEHL, FRANK JR 311 S. OSCEOLA AVE INVERNESS, FL 34452 US					
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: FRANK NEHLS JR					
Electronic Signature of Registered Agent Date				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:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P ( ) I NEHLS, FRANK 311 S. OSCEOL INVERNESS, FL	A AVE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VP ( ) I NEHLS, FRANK 311 S. OSCEOL INVERNESS, FL	A AVE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	SEC () I JOHNSON, LOR 311 S. OSCEOL INVERNESS, FL	A AVE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	DIR ( ) I NEHLS, FRANK 311 S. OSCEOL INVERNESS, FL	A AVE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	DIR ( ) I NEHLS, FRANK 311 S. OSCEOL INVERNESS, FL	A AVE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	DIR ( ) I JOHNSON, LOR 311 S. OSCEOL INVERNESS, FL	A AVE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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					

SIGNATURE: LORI L JOHNSON SECR 10/05/2006

above, or on an attachment with an address, with all other like empowered.