## 2010 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P04000032525

Entity Name: CHARLES SQUILLACOTE, INC.

FILED Apr 16, 2010 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3120 W STATE RD 40 215 GREENBRIAR AVE ORMONDBEACH, FL 32114 ORMONDBEACH, FL 32114

Current Mailing Address: New Mailing Address:

215 GREENBRIAR AVE ORMOND BEACH, FL 32174 215 GREENBRIAR AVE ORMONDBEACH, FL 32114

FEI Number: 54-2144845 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

SQUILLACOTE, CHARLES 215 GREENBRIAR AVE. ORMOND BEACH, FL 32174

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: CHARLES SQUILLACOTE 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 ( ).

US

## **OFFICERS AND DIRECTORS:**

Title:

Name: SQUILLACOTE, CHARLES
Address: 215 GREENBRIAR AVE.
City-St-Zip: ORMOND BEACH, FL 32174

Title: D

Name: SQUILLACOTE, CHARLES TOWNER

Address: 215 GREENBRAIR AVE
City-St-Zip: ORMOND BEACH, FL 32174

Title: D

Name: SQUILLACOTE, CHARLES TOWNER

Address: 215 GREENBRAIR AVE City-St-Zip: ORMOND BEACH, FL 32174

Title: D

Name: SQUILLACOTE, CHARLES T OWNER

Address: 215 GREENBRAIR AVE City-St-Zip: ORMOND BEACH, FL 32174

Title:

Name: SQUILLACOTE, CHARLES TOWNER

Address: 215 GREENBRAIR AVE City-St-Zip: ORMOND BEACH, FL 32174

Title: D

Name: SQUILLCOTE, CHARLES T OWNER

Address: 215 GREENBRAIR AVE
City-St-Zip: ORMOND BEACH, FL 32174

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: CHARLES SQUILLACOTE INC. MR. 04/16/2010