

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000032649

FILED
Sep 30, 2009
Secretary of State

Entity Name: KT FLETCHERS, INC.

Current Principal Place of Business:

2063 RIVER REACH AR.
APT # 385
NAPLES, FL 34104

New Principal Place of Business:

3737 DOMESTIC AVE UNIT 20
NAPLES, FL 34104

Current Mailing Address:

2063 RIVER REACH DR.
APT # 385
NAPLES, FL 34104

New Mailing Address:

3737 DOMESTIC AVE UNIT 20
NAPLES, FL 34104

FEI Number: 73-1696080

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TOMPKINS, KRISTINA G
2063 RIVER REACH DR.
APT #385
NAPLES, FL 34104 US

Name and Address of New Registered Agent:

TOMPKINS, KRISTINA G
3737 DOMESTIC AVE UNIT 20.
NAPLES, FL 34104 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: KRISTINA G TOMPKINS

09/30/2009

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: PSTD () Delete
Name: TOMPKINS, KRISTINA G
Address: 2063 RIVER REACH DR. APT 385
City-St-Zip: NAPLES, FL 34104

Title: V () Delete
Name: TOMPKINS, STEPHEN M
Address: 2063 RIVER REACH DR. APT 385
City-St-Zip: NAPLES, FL 34104

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: TOMPKINS, KRISTINA G
Address: 3737 DOMESTIC AVE UNIT 20
City-St-Zip: NAPLES, FL 34104

Title: V (X) Change () Addition
Name: TOMPKINS, STEPHEN M
Address: 3737 DOMESTIC AVE UNIT 20
City-St-Zip: NAPLES, FL 34104

I hereby certify that the information supplied with this filing does not qualify 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KRISTINA G TOMPKINS

PRES

09/30/2009

Electronic Signature of Signing Officer or Director

Date