

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000055386

FILED
Nov 03, 2008
Secretary of State

Entity Name: SPRINGDALE TRAVEL OF FLORIDA, INC.

Current Principal Place of Business:

313 SOUTH PALAFOX STREET
PENSACOLA, FL 32502

New Principal Place of Business:

Current Mailing Address:

313 SOUTH PALAFOX STREET
PENSACOLA, FL 32502

New Mailing Address:

1087 DOWNTOWNER BLVD
SUITE 500
MOBILE, AL 36609

FEI Number: 20-0938812

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MATTHEWS, JR., ESEL F
308 SOUTH JEFFERSON STREET
PENSACOLA, FL 32502 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: ESEL F MATTHEWS, JR.

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: PD () Delete
Name: BENDER, ROBERT H
Address: 313 SOUTH PALAFOX STREET
City-St-Zip: PENSACOLA, FL 32502

Title: ST () Delete
Name: CAPE, STEPHEN
Address: 313 SOUTH PALAFOX STREET
City-St-Zip: PENSACOLA, FL 32502

Title: D () Delete
Name: CAREY, BENNIE W
Address: 313 SOUTH PALAFOX STREET
City-St-Zip: PENSACOLA, FL 32502

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ROBERT H BENDER

Electronic Signature of Signing Officer or Director

OWNE

11/03/2008

Date