

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # **P04000062183**

1. Entity Name
THE FLAGSTONE GROUP COMMERCIAL INC.



FILED
06 JAN -4 PH 3: 59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
10920 BAYMEADOWS ROAD
STE 27, BOX 143
JACKSONVILLE, FL 32256 US

Mailing Address
10920 BAYMEADOWS ROAD
STE 27, BOX 143
JACKSONVILLE, FL 32256 US

2. Principal Place of Business
8552 Baymeadows Rd

3. Mailing Address
8552 Baymeadows Rd

Suite, Apt. #, etc.

City & State
Jacksonville FL

City & State
Jacksonville FL

Zip
32256

Country
USA

Zip
32256

Country
USA

6. Name and Address of Current Registered Agent

Glenn Amerson
421 E. Woodhaven Dr.
Ponte Vedra FL 32082

REINSTATEMENT 05

REIN-P CR2E098 (6/04)

4. FEI Number
22-3858255

Applied For
☒ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **[Signature]** **12-12-05**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST Amy Krieger 8552 Baymeadows Rd Jax FL 32256	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Sue Krieger 8552 Baymeadows Rd Jax FL 32256	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Glenn Amerson 8552 Baymeadows Rd Jax FL 32256	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	600062292436 12/20/05--01039--006 **150.00	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	[Signature]	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **[Signature]** **Glenn Amerson** **12-12-05** **904 739 1022**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #



December 28, 2005

**Florida Department of State
Attention: Sean Toner**

Ref #: P0400062183

Dear Mr. Toner,

This letter is in response to your letter regarding The Flagstone Group Commercial, Inc. We are requesting waiver of the reinstatement fee due to the non receipt of the original/second notice annual report.

If you have any additional questions, you may contact Chad Shultz CPA at (904) 928-0500.

Thank you for your cooperation in rectifying this matter.

Sincerely,

A handwritten signature in black ink, appearing to read "G. Amerson", followed by a long horizontal flourish.

**Glenn Amerson
President**

8552 Baymeadows Road
Jacksonville, Florida 32256
Phone (904) 739-1022
Fax (904) 739-1041