

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

FILED

06 MAR 29 PM 3:07

SECRET  
TALLAHASSEE, FLORIDA

DOCUMENT # P04000072495

1. Entity Name  
ROBERT J. SKINNER, INC.



Principal Place of Business  
812 45 AVE N  
ST PETERSBURG, FL 33703

Mailing Address  
812 45 AVE N  
ST PETERSBURG, FL 33703

2. Principal Place of Business  
Suite, Apt. #, etc.  
City & State  
Zip Country

3. Mailing Address  
Suite, Apt. #, etc.  
City & State  
Zip Country

05/02/05 90529 037 \$150.00



REINSTATEMENT 05-06

4. FEI Number  
20-1015622

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent  
SKINNER, ROBERT J  
812 45 AVE N  
ST PETERSBURG, FL 33703

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: *Robert J. Skinner* *Robert J. Skinner* 3-25-06

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

FILE NOW!!! FEE IS \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SKINNER, ROBERT J 812 45 AVE N ST PETERSBURG, FL 33703 <input type="checkbox"/> Delete	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"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Robert J. Skinner* *Robert J. Skinner* 3-25-06

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

727-421-2565

2052

Division of Corporations  
P O Box 6327  
Tallahassee, Fl 32314

March 21, 2005

To Whom It May Concern:

I filed my 2005 return on April 30, 2005 along with my check for \$ 150.00, which has been cashed.

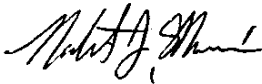
When I came to renew my 2006 return, I found that my Corporation had been administratively dissolved. I called to see what the problem was and was informed the report had been sent back for lack of Federal ID #.

I never received this information.

As per your instructions, enclosed is the reinstatement form, along with a check for \$150.00 for my corporation renewal for 2006.

Thank you,

Robert J Skinner  
President



Robert J Skinner, Inc  
812 45<sup>th</sup> Ave N  
St Petersburg, Fl 33703