


2006 FOR PROFIT CORPORATION REINSTATEMENT

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FILED

06 JUN 19 11 7:40

DOCUMENT # P04000076896		
1. Entity Name STRICKLAND'S HOME IMPROVEMENT, INC.		

Principal Place of Business 38016 GRAY'S AIRPORT RD LADY LAKE, FL 32159	Mailing Address 38016 GRAY'S AIRPORT RD LADY LAKE, FL 32159
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



REINSTATEMENT 06132006 REIN-P 06132006 (11/05) 05:06

4. FEI Number 20-1135714		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent STRICKLAND, TERRY W 38016 GRAY'S AIRPORT RD LADY LAKE, FL 32159		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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 *Terry W. Strickland* DATE 6-15-06

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

FILE NOW!!! FEE IS \$300.00	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STRICKLAND, TERRY W 38016 GRAY'S AIRPORT RD LADY LAKE, FL 32159 <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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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

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: *Terry W. Strickland* TERRY W. STRICKLAND
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date
Daytime Phone #

Did not receive
notice last year.

mailing address

Terry Strickland
P.O. BOX 953
Lady Lake FL
32158

Thank you
Terry Strickland

June 13, 2006

Division of Corporations
P. O. Box 6327
Tallahassee, Florida 32314

Re: **Strickland's Home Improvement, Inc.**

Dear Sir or Madam:

Please find enclosed the 2006 For Profit Corporation Reinstatement along with my check in the amount of \$300.00 to cover the reinstatement. It is my understanding that I only have to pay the \$300.00 to reinstate since I did not receive the prior notice.

Thank you for your attention to this matter.

Very truly yours,

Terry W. Strickland
President

Enclosures