

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPROVED AND FILED

192

CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS

06 NOV 16 AM 10:19

SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT #

1. Corporation Name

04000116264

S.C.T. Straight Line Siding Inc.

2. Principal Office Address

3. Mailing Office Address

3376 Wilderness Circle Suite, Apt. #, etc.

3376 Wilderness Circle Suite, Apt. #, etc.

Middleburg City & State

Middleburg City & State

Florida

Florida

Zip Country 32068 U.S.

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REINSTATEMENT

05-06 ABC

CR2E081 (12/05)

4. Date Incorporated or Qualified To Do Business in Florida

8-10-2004

5. FEI Number

80-011-7848

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

SHANE Christopher Townsend

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

3376 Wilderness Circle

Suite, Apt. #, Etc.

800081773078

11/14/06 01077 009 **300.00

City

Middleburg

State

FL

Zip Code

32068

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent

Shane C Townsend

REGISTERED AGENT MUST SIGN

Date 11-8-06

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	Shane Townsend	3376 Wilderness Circle	Middleburg FL 32068

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption contained in Chapter 119, F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

Shane C Townsend

SHANE C. Townsend

Date 11-8-06

(904)449-1161

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

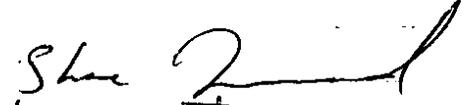
1161

2008

Nov. 8 2008

To whom it may concern,

In September of 2004 I moved my business from 112 Saturn Ln. Orange Park FL. to 3376 Wilderness Circle Middleburg FL. In doing so, I did not receive an annual report notice for S.C.T. Straight Line Siding Inc. Please waive the reinstatement fee.

Sincerely, 
Shane C. Townsend

FIN 80-011-7848