

# **2010 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P04000120685

**FILED**  
**Nov 16, 2010**  
**Secretary of State**

**Entity Name:** JOHNS TRACTOR SERVICES INC

**Current Principal Place of Business:**

6744 MATHER AVE  
ORLANDO, FL 32809

**New Principal Place of Business:**

**Current Mailing Address:**

6744 MATHER AVE  
ORLANDO, FL 32809

**New Mailing Address:**

**FEI Number:** 20-1553010

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WELLS, JOHN H  
6744 MATHER AVE  
ORLANDO, FL 32809 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:** JOHN WELL

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** PRES  
**Name:** WELLS, JOHN H  
**Address:** 6744 MATHER AVE  
**City-St-Zip:** ORLANDO, FL 32809

**Title:** OFFI  
**Name:** WELLS, JOHN H  
**Address:** 6744 MATHER AVE  
**City-St-Zip:** ORLANDO, FL 32809

I hereby 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 all other like empowered.

**SIGNATURE:** JOHN WELLS

PRES

11/16/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date