

# **2006 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P04000134464

Entity Name: NLJ ENTERPRISES, INC.

**FILED**  
**Dec 14, 2006**  
**Secretary of State**

**Current Principal Place of Business:**

2371 DELLA DR  
NAPLES, FL 34119

**New Principal Place of Business:**

3771 15TH AVE SW  
NAPLES, FL 34117

**Current Mailing Address:**

2371 DELLA DR  
NAPLES, FL 34119

**New Mailing Address:**

3771 15TH AVE SW  
NAPLES, FL 34117

FEI Number: 20-1751417

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

JOHNSON, NEAL L  
2371 DELLA DR  
NAPLES, FL 34119 US

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

JOHNSON, NEAL L  
3771 15TH AVE SW  
NAPLES, FL 34117 US

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: NEAL L JOHNSON

12/14/2006

Electronic Signature of Registered Agent

Date

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: JOHNSON, NEAL L PRES  
Address: 2371 DELLA DR  
City-St-Zip: NAPLES, FL 34119  
  
Title: VP (X) Delete  
Name: PETKOVICH, SARA J OFFICER  
Address: 2371 DELLA DR.  
City-St-Zip: NAPLES, FL 34119

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: JOHNSON, NEAL L PRES  
Address: 3771 15TH AVE SW  
City-St-Zip: NAPLES, FL 34117  
  
Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: NEAL L JOHNSON

P

12/14/2006

Electronic Signature of Signing Officer or Director

Date