2007 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Dec 04, 2007
Secretary of State

DOCUMENT# P04000163945

Entity Name: GENE SELLS, PA

Current Principal Place of Business:

2896 PINEHURST AVE
BELLEAIR BLUFFS, FL 33770 US

New Principal Place of Business:

5741 S OLDFIELD AVENUE
HOMOSASSA SPRINGS, FL 34446 US

Current Mailing Address:

2896 PINEHURST AVE
BELLEAIR BLUFFS, FL 33770 US

New Mailing Address:

P.O BOX 2088
HOMOSASSA SPRINGS, FL 34447 US

FEI Number: 20-1964896 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HASTINGS, DAVID C
2207 54TH ST S
GULFPORT, FL 33707 US

Name and Address of New Registered Agent:

SELLS, GENE
5741 S OLDFIELD AVENUE
HOMOSASSA SPRINGS, FL 34446 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: OUT OF BUSINESS DUE HEALTH REASON 12/04/2007
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: DPT ( ) Delete
Name: SELLS, GENE
Address: 2896 PINEHURST AVE
City-St-Zip: BELLEAIR BLUFFS, FL 33770

Title: VPS (X) Delete
Name: SELLS, GENE
Address: 2896 PINEHURST AVE
City-St-Zip: BELLEAIR BLUFFS, FL 33770

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition
Name: SELLS, GENE
Address: 5741 S OLDFIELD AVE
City-St-Zip: HOMOSASSA SPRINGS, FL 34446

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: GENE SELLS P.A. PRES 12/04/2007
Electronic Signature of Signing Officer or Director Date