

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000002755

FILED
May 31, 2007
Secretary of State

Entity Name: EMERALD COAST STRAIGHT LINE PAINTING, INC.

Current Principal Place of Business:

8268 TOLEDO ST
NAVARRE, FL 32566 US

New Principal Place of Business:

135 RAY VECCHINO RD.
MARYESTHER, FL 32569 US

Current Mailing Address:

8268 TOLEDO ST
NAVARRE, FL 32566 US

New Mailing Address:

135 RAY VECCHINO RD.
MARYESTHER, FL 32569 US

FEI Number: 20-0511893

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GLOSSOP, DAVID
8268 TOLEDO ST
NAVARRE, FL 32566 US

Name and Address of New Registered Agent:

GLOSSOP, DAVID
135 RAY VECCHINO RD.
MARYESTHER, FL 32569 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: DAVID R GLOSSOP

05/31/2007

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: PST () Delete
Name: GLOSSOP, DAVID
Address: 8268 TOLEDO ST
City-St-Zip: NAVARRE, FL 32566 US

Title: D (X) Delete
Name: DEPASQUALE, CHRISTIE
Address: 2423 FRONTERA ST
City-St-Zip: NAVARRE, FL 32566 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change () Addition
Name: GLOSSOP, DAVID
Address: 135 RAY VECCHINO RD.
City-St-Zip: MARYESTHER, FL 32569 US

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: DAVID R GLOSSOP

PST

05/31/2007

Electronic Signature of Signing Officer or Director

Date