

# 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P05000015437

1. Entity Name  
JOHN YOUNG PARKWAY DONUTS, INC.



FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

07 JAN -4 AM 8:56

Principal Place of Business  
5175 WELLINGTON PARK CIRCLE UNIT C57  
ORLANDO, FL 32839

Mailing Address  
5175 WELLINGTON PARK CIRCLE UNIT C57  
ORLANDO, FL 32839

2. Principal Place of Business  
15600 Grays Harbor Way  
Suite, Apt. #, etc.

3. Mailing Address  
12 Fieldstone Circle  
Suite, Apt. #, etc.

City & State  
Clermont, FL

City & State  
Whitman, MA

Zip  
34714

Country  
USA

Zip  
02382

Country  
USA



01032007 REIN-P CR2E098 (11/05)

4. FEI Number  
32-0139065

Applied For  
Not Applied

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BROOKES, ERIC N  
5175 WELLINGTON PARK CIRCLE UNIT C57  
ORLANDO, FL 32839

7. Name and Address of New Registered Agent

Name  
Eric N. Brookes

Street Address (P.O. Box Number is Not Acceptable)  
15600 Grays Harbor Way

City  
Clermont

FL

Zip Code  
34714

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Eric N. Brookes ERIC N. Brookes President JANUARY 3, 2007  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$300.00

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

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

P  
BROOKES, ERIC N  
5175 WELLINGTON PARK CIRCLE UNIT C57  
ORLANDO, FL 32839

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

ST  
TEIXEIRA, FRANK  
12 FIELDSTONE CIRCLE  
WHITMAN, MA 02382

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

15600 Grays Harbor Way  
Clermont, FL 34714

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

700083214847  
01/04/07--01032--001 \*\*308.75

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

REINSTATEMENT 06-07

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11, changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Eric N. Brookes ERIC N. Brookes President 01/03/07 352-442-8178  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #