

# **2009 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P05000040572

**FILED**  
**Oct 12, 2009**  
**Secretary of State**

**Entity Name:** SHADCO OF SOUTHWEST FLORIDA INC

**Current Principal Place of Business:**

3690 LAVILLA AVE  
NORTH PORT, FL 34286

**New Principal Place of Business:**

8437 BUTTONQUAIL DR  
ENGLEWOOD, FL 34224

**Current Mailing Address:**

3690 LAVILLA AVE  
NORTH PORT, FL 34286

**New Mailing Address:**

8437 BUTTONQUAIL DR  
ENGLEWOOD, FL 34224

**FEI Number:** 20-2523461

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

BARCO, CARROLL S JR  
1861 PLACIDA RD  
201  
ENGLEWOOD, FL 34223 US

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

KRISKO, KATHLEEN J  
8437 BUTTONQUAIL DR  
ENGLEWOOD, FL 34224 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:** KATHLEEN J. KRISKO

10/12/2009

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** PD ( ) Delete  
**Name:** KRISKO, KATHLEEN  
**Address:** 3690 LAVILLA AVE  
**City-St-Zip:** NORTH PORT, FL 34286

**Title:** ( ) Delete  
**Name:**  
**Address:**  
**City-St-Zip:**

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

**Title:** PDST (X) Change ( ) Addition  
**Name:** KRISKO, KATHLEEN  
**Address:** 8437 BUTTONQUAIL DR  
**City-St-Zip:** ENGLEWOOD, FL 34224

**Title:** VP ( ) Change (X) Addition  
**Name:** KRISKO, JAMES  
**Address:** 8437 BUTTONQUAIL DR.  
**City-St-Zip:** ENGLEWOOD, FL 34224

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:** KATHLEEN KRISKO

DP

10/12/2009

Electronic Signature of Signing Officer or Director

Date