

# 2010 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000049427

**FILED**  
**Oct 04, 2010**  
**Secretary of State**

**Entity Name:** MIDSUMMER KNIGHTS DREAM INC

**Current Principal Place of Business:**

1421 NE 8TH AVENUE  
APT 7  
OCALA, FL 34470 US

**New Principal Place of Business:**

1421 NE 8TH AVENUE  
UNIT 7  
OCALA, FL 34470 US

**Current Mailing Address:**

1421 NE 8TH AVENUE  
APT 7  
OCALA, FL 34470 US

**New Mailing Address:**

1421 NE 8TH AVENUE  
UNIT 7  
OCALA, FL 34470 US

**FEI Number:** 20-2608815

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

WALKER III, ROBERT F  
1421 NE 8TH AVENUE  
APT 7  
OCALA, FL 34470 US

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

WALKER, ROBERT F III  
1421 NE 8TH AVENUE  
UNIT 7  
OCALA, FL 34470 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: ROBERT F WALKER III

10/04/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P D  
Name: WALKER III, ROBERT F  
Address: 1421 NE 8TH AVENUE UNIT 7  
City-St-Zip: OCALA, FL 34470 US

I hereby 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 all other like empowered.

SIGNATURE: ROBERT F WALKER III

PD

10/04/2010

Electronic Signature of Signing Officer or Director

Date