2009 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Nov 04, 2009
Secretary of State

DOCUMENT# P05000067345

Entity Name: SITESCAPES, INC

Current Principal Place of Business:

11570 NE 49TH STREET
SILVER SPRINGS, FL 34488

New Principal Place of Business:

Current Mailing Address:

1271 NE 8TH STREET
OCALA, FL 34470

New Mailing Address:

FEI Number: 20-2800424 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SURRENCY, TIMOTHY P
11570 NE 49TH STREET
SILVER SPRINGS, FL 34488 US

Name and Address of New Registered Agent:

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: TIMOTHY P SURRENCY

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: P ( ) Delete
Name: SURRENCY, TIMOTHY P
Address: 11570 NE 49TH STREET
City-St-Zip: SILVER SPRINGS, FL 34488

Title: VP ( ) Delete
Name: HOMAN, JAMES S
Address: 5265 SE 39TH LOOP
City-St-Zip: OCALA, FL 34480

Title: SEC ( ) Delete
Name: SURRENCY, HILDA B
Address: 1271 NE 8TH STREET
City-St-Zip: OCALA, FL 34470

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition
Name: SURRENCY, TIMOTHY P
Address: 11570 NE 49TH STREET
City-St-Zip: SILVER SPRINGS, FL 34488

Title: VP (X) Change ( ) Addition
Name: SURRENCY, HILDA B
Address: 1271 NE 8TH ST
City-St-Zip: OCALA, FL 34470

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: HILDA B SURRENCY VP 11/04/2009

Electronic Signature of Signing Officer or Director — Date