

2006 FOR PROFIT CORPORATION REINSTATEMENT

FILED

06 DEC 26 AM 9:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P05000127953

1. Entity Name
RESSLER'S TREE SERVICE, INC.



Principal Place of Business
14591 N.W. 66TH AVENUE
CHIEFLAND, FL 32626

Mailing Address
14591 N.W. 66TH AVENUE
CHIEFLAND, FL 32626



REINSTATEMENT

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RESSLER, KENNEDY J
14591 N.W. 66TH AVENUE
CHIEFLAND, FL 32626

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Kennedy J Ressler

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

12/18/06

DATE

FILE NOW!!! FEE IS \$750.00
After January 1, 2007, Fee will be \$900.00

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete
NAME RESSLER, KENNEDY J
STREET ADDRESS 14591 N.W. 66TH AVENUE
CITY-ST-ZIP CHIEFLAND, FL 32626

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
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TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Kennedy J Ressler

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12/18/06

DATE

(352) 493-9313

Daytime Phone #