2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000135233

OCALA, FL 34474

City-St-Zip:

Entity Name: NADAL DEVELOPMENT AND INVESTMENTS, INC

FILED Jan 26, 2007 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
5001 SW 20) ST				
OCALA, FL	34474				
Current Mailing Address:			New Mailing Address:		
5001 SW 20	ST				
OCALA, FL	34474				
FEI Number:	20-3559462	FEI Number Applied For () FEI Nu	mber Not Appli	licable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
VIDAL, JOS 5001 SW 20					
606 OCALA, FL	34474 US	3			
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: JOSE VIDAL					
	Electr	onic 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:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P VIDAL, JOSE 5001 SW 10 OCALA, FL	ST	Title: Name: Address: City-St-Zip:	PT (X) Change () Addition VIDAL, JOSE 5001 SW 10 ST OCALA, FL 34474	
Title: Name: Address: City-St-Zip:	V NANCE, RIC 4390 NE 34 OCALA, FL	ст	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T NANCE, JAN 4390 NE 34 OCALA, FL	СТ	Title: Name: Address: City-St-Zip:	SVP (X) Change () Addition NANCE, JANINE A 4390 NE 34 CT OCALA, FL 34479	
Title: Name: Address:	S VIDAL, DOR 5001 SW 10		Title: Name: Address:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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.

City-St-Zip:

SIGNATURE: JOSE VIDAL P 01/26/2007