

# **2008 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P05000135490

Entity Name: DOMINICK CASELLA INC

**FILED**  
**Nov 07, 2008**  
**Secretary of State**

## **Current Principal Place of Business:**

2318 BARONS CT  
TAVARES, FL 32778 US

## **New Principal Place of Business:**

1412 HOPE CT  
TAVARES, FL 32778 US

## **Current Mailing Address:**

2318 BARONS CT  
TAVARES, FL 32778 US

## **New Mailing Address:**

1412 HOPE CT  
TAVARES, FL 32778 US

FEI Number: 20-3564552

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CASELLA, DOMINICK  
2318 BARONS CT  
TAVARES, FL 32778 US

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

CASELLA, DOMINICK  
1412 HOPE CT  
TAVARES, FL 32778 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: DOMINICK CASELLA

11/07/2008

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: PD ( ) Delete  
Name: CASELLA, DOMINICK  
Address: 2318 BARONS CT  
City-St-Zip: TAVARES, FL 32778 US

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

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

Title: PD (X) Change ( ) Addition  
Name: CASELLA, DOMINICK  
Address: 1412 HOPE CT  
City-St-Zip: TAVARES, FL 32778 US

Title: D ( ) Change (X) Addition  
Name: VARGA, GEORGE A III  
Address: 1412 HOPE CT  
City-St-Zip: TAVARES, FL 32778

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: DOMINICK CASELLA

PD

11/07/2008

Electronic Signature of Signing Officer or Director

Date