

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000150970

FILED  
Oct 13, 2006  
Secretary of State

Entity Name: J & C BOBCAT SERVICES INC. OF CENTRAL FLORIDA

**Current Principal Place of Business:**

480 WEST HAINES BLVD.  
LAKE ALFRED, FL 33850

**New Principal Place of Business:**

**Current Mailing Address:**

480 WEST HAINES BLVD.  
LAKE ALFRED, FL 33850

**New Mailing Address:**

FEI Number: 20-3782614

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HOFFMAN, JAMIE B.  
480 WEST HAINES BLVD.  
LAKE ALFRED, FL 33850 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: JAMIE HOFFMAN

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: DP ( ) Delete  
Name: HOFFMAN, JAMIE B.  
Address: 480 WEST HAINES BLVD.  
City-St-Zip: LAKE ALFRED, FL 33850

Title: DV ( ) Delete  
Name: HOFFMAN, CHRISTINA M.  
Address: 480 WEST HAINES BLVD.  
City-St-Zip: LAKE ALFRED, FL 33850

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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.

SIGNATURE: JAMIE HOFFMAN

Electronic Signature of Signing Officer or Director

D/P

10/13/2006

Date