

# 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000168135

FILED  
May 18, 2007  
Secretary of State

**Entity Name:** TROY AND BARBARA SUMMERALL, INC.

**Current Principal Place of Business:**

19241 N. DALE MABRY HWY  
LUTZ, FL 33548

**New Principal Place of Business:**

**Current Mailing Address:**

10468 BLACKMORE DR.  
TAMPA, FL 33647

**New Mailing Address:**

FEI Number: 20-4015180

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SUMMERALL, TROY M  
10468 BLACKMORE DR.  
TAMPA, FL 33647 US

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

WATKINS, CARL T CPA  
5103 MEORIAL HWY  
TAMPA, FL 33634 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: CARL T. WATKINS

05/18/2007

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: SUMMERALL, BARBARA F  
Address: 10468 BLACKMORE DR.  
City-St-Zip: TAMPA, FL 33647

Title: VP ( ) Delete  
Name: SUMMERALL, TROY M  
Address: 10468 BLACKMORE DR.  
City-St-Zip: TAMPA, FL 33647

**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 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: CARL T. WATKINS

CPA

05/18/2007

Electronic Signature of Signing Officer or Director

Date