

# **2010 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P06000100741

**FILED**  
**Sep 28, 2010**  
**Secretary of State**

**Entity Name:** SHOOTERS EMPORIUM OF LAKE CITY, INC.

**Current Principal Place of Business:**

2294 CARPENTER RD.  
LAKE CITY, FL 32025

**New Principal Place of Business:**

**Current Mailing Address:**

2294 CARPENTER RD.  
LAKE CITY, FL 32025

**New Mailing Address:**

**FEI Number:** 11-3787863

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BROWN, WILLIAM  
2294 CARPENTER RD.  
LAKE CITY, FL 32025 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:** WILLIAM BROWN

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** D  
**Name:** BROWN, WILLIAM  
**Address:** 2294 CARPENTER RD.  
**City-St-Zip:** LAKE CITY, FL 32025

**Title:** D  
**Name:** SEIJO, SANDRA  
**Address:** 2294 CARPENTER RD.  
**City-St-Zip:** LAKE CITY, FL 32025

I hereby 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 all other like empowered.

**SIGNATURE:** WILLIAM BROWN

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

PRES

09/28/2010

\_\_\_\_\_  
Date