

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000155169

Entity Name: FLORIDA VAN POOLS' INC.

FILED
Nov 30, 2009
Secretary of State

Current Principal Place of Business:

143 GUADALAJARA DRIVE
KISSIMMEE, FL 34743

New Principal Place of Business:

111-MONUMENT AVENUE
333
KISSIMMEE, FL 34741

Current Mailing Address:

143 GUADALAJARA DRIVE
KISSIMMEE, FL 34743

New Mailing Address:

111-MONUMENT AVENUE
333
KISSIMMEE, FL 34741

FEI Number: 20-8280924

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

COLLAZO, LUIS
143 GUADALAJARA DRIVE
KISSIMMEE, FL 34743 US

Name and Address of New Registered Agent:

COLLAZO, LUIS
111-MONUMENT AVENUE
333
KISSIMMEE, FL 34741 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: LUIS COLLAZO

11/30/2009

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: MR. () Delete
Name: COLLAZO, LUIS
Address: 143 GUADALAJARA DRIVE
City-St-Zip: KISSIMMEE, FL 34743

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: LUIS COLLAZO

OWND

11/30/2009

Electronic Signature of Signing Officer or Director

Date