2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000088376

City-St-Zip:

FORT MYERS, FL 33912

Entity Name: ALL AMERICAN SERVICES OF LEE COUNTY, INC.

FILED Feb 23, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	OUNTRY COUR ŒRS, FL 3391:				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	OUNTRY COUR ŒRS, FL 3391:				
FEI Number	r: 02-0682043	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of C	Current Registered Agent:	Name and Address o	f New Registered Agent:	
15701 CO	VS, JOHN W DUNTRY COUR ŒRS, FL 3391:				
	e named entity : te of Florida.	submits this statement for the	purpose of changing its registered	d office or registered agent, or both,	
SIGNATU	IRE: JOHN BL	JRROWS			
	Electror	nic Signature of Registered Ag	ent	Date	
		3(2)(b), F.S., the corporation did no	ot receive the prior notice.		
Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	P () BURROWS, JO 15701 COUNTF FORT MYERS,	RY COURT	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () BURROWS, JO 15701 COUNTF FORT MYERS,	RY COURT	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SEC () BURROWS, JO 15701 COUNTF FORT MYERS,	RY COURT	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	TR () BURROWS, JO		Title: Name: Address:	() Change () Addition	

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.

City-St-Zip:

SIGNATURE: JOHN BURROWS PRES 02/23/2009