## 2008 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P07000102056

Address:

City-St-Zip:

2618 PARK ST.

LAKE WORTH, FL 33460 US

Entity Name: L-2 TAYLORCRAFT, INC.

FILED Oct 09, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 2618 PARK ST. LAKE WORTH, FL 33460 LIS **Current Mailing Address: New Mailing Address:** 2618 PARK ST. LAKE WORTH, FL 33460 US FEI Number: 26-1665338 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: UNITED STATES CORPORATION AGENTS, INC. RUFFNER, J SCOT 2618 PARK STREET 13302 WINDING OAKS BLVD LAKE WORTH, FL, FL 33460 US SUITE A-100 TAMPA, FL 336123425 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: J SCOT RUFFNER 10/09/2008 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition COONER, G. STEVE Name: Name: 2618 PARK ST. Address: Address: City-St-Zip: LAKE WORTH, FL 33460 US City-St-Zip: Title: Title: () Delete (X) Change ( ) Addition RUFFNER, J. SCOT Name: Name: RUFFNER, J SCOT 2618 PARK ST. 2618 PARK ST. Address: Address: LAKE WORTH, FL 33460 US LAKE WORTH, FL 33460 US City-St-Zip: City-St-Zip: Title: ( ) Delete Title: (X) Change ( ) Addition RUFFNER, J. SCOT RUFFNER, J SCOT Name: Name: 2618 PARK ST 2618 PARK ST Address: Address: City-St-Zip: LAKE WORTH, FL 33460 US City-St-Zip: LAKE WORTH, FL 33460 US Title: () Delete Title: () Change () Addition COONER, G. STEVE Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: G. STEVE COONER P 10/09/2008