

# 2013 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P08000017751

**FILED**  
**Apr 19, 2013**  
**Secretary of State**

**Entity Name:** PRECISION PLAYGROUNDS-NC, INC.

**Current Principal Place of Business:**

5120 DAMASCUS RD. NORTH  
JACKSONVILLE BEACH, FL 32207

**New Principal Place of Business:**

5109DAMASCUS RD. SOUTH  
JACKSONVILLE, FL 32207

**Current Mailing Address:**

5120 DAMASCUS RD. NORTH  
JACKSONVILLE BEACH, FL 32207

**New Mailing Address:**

5109DAMASCUS RD. SOUTH  
JACKSONVILLE, FL 32207

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired (X)**

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

KEENE, RICHARD C  
1122 THIRD STREET  
SUITE 6  
NEPTUNE BEACH, FL 32266 US

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

CRAFT, SCOTT A  
5109 DAMASCUS RD S  
JACKSONVILLE, FL 32207 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: SCOTT A CRAFT

04/19/2013

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: CRAFT, SCOTT A  
Address: 5109 DAMASCUS RD. SOUTH  
City-St-Zip: JACKSONVILLE, FL 32207

Title: VP  
Name: CRAFT, SCOTT A  
Address: 5109 DAMASCUS RD. SOUTH  
City-St-Zip: JACKSONVILLE, FL 32207

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: SCOTT A CRAFT

PD

04/19/2013

Electronic Signature of Signing Officer or Director

Date