


# 2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P93000024679		
1. Entity Name WILLIAMS' LAWN AND LANDSCAPING, INC.		

FILED

04 OCT 25 AM 10:35

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business 245 GARFIELD RD. DELTONA, FL 32725	Mailing Address 245 GARFIELD RD. DELTONA, FL 32725
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2. Principal Place of Business  Suite, Apt. #, etc.	3. Mailing Address  Suite, Apt. #, etc.
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City & State  Zip	City & State  Zip	Country	Country
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10202004 REIN-P CR2E098 (6/04)

4. FEI Number 59-3169422		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent WILLIAMS, DAVID S 245 GARFIELD RD. DELTONA, FL 32725		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE David S. Williams DAVID S. WILLIAMS 10/18/04  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00 After January 1, 2005, Fee will be \$300.00	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P WILLIAMS, DAVID S 245 GARFIELD RD. DELTONA, FL 32725 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 700042160847 10/25/04--01074--001 **150.00
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VST WILLIAMS, JANIS L 245 GARFIELD RD. DELTONA, FL 32725 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: David S. Williams DAVID S. WILLIAMS 10/18/04 386-574-1995  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Oct 18, 2004

Division of Corp.  
P.O. Box 6327  
Tallahassee, FL 32314

Dear Sir/Madam,

Enclosed is a check for \$150- for the UBR  
report for Williams Lawn & Landscape, Inc. I  
realize this is late but we were hit by all the  
hurricanes & our house is in disrepair, where our  
office is also located. Please contact me if  
you need any additional information.

Sincerely,

David S. Williams

DAVID S. Williams

245 Garfield Rd.

Deltona, FL 32725

386-574-1995

59-3169422