

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P93000082448

1. Entity Name
SPENCER STONE WORKS, INC.



FILED

07 AUG 24 PM 2:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
100 CADIZ ST
#108
TALLAHASSEE, FL 32301

Mailing Address
100 CADIZ ST
#108
TALLAHASSEE, FL 32301

2. Principal Place of Business - No P.O. Box #
640 E. Call St.
Suite, Apt. #, etc.

3. Mailing Address
640 E. Call St.
Suite, Apt. #, etc.



08242007 REIN-P CR2E098 (1/07)

City & State
Tallahassee, FL
Zip
32301
Country
USA

City & State
Tallahassee, FL
Zip
32301
Country

4. FEI Number
59-3212217
Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SPENCER, EDDIE
100 CADIZ ST #108
TALLAHASSEE, FL 32301

7. Name and Address of New Registered Agent

Name
Spencer, Eddie
Street Address (P.O. Box Number is Not Acceptable)
640 E. Call St.
City
Tallahassee, FL Zip Code
32301

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable

FILE NOW!!! FEE IS \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
SPENCER, EDDIE
100 CADIZ ST #108
TALLAHASSEE, FL 32301 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
WOOD, PAULA
3222 SHARER RD
TALLAHASSEE, FL 32311 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
SPENCER, MICHAEL C
851 VILLAGE LAKE DR
DELAND, FL 32724 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
BENDER, ROD
100 CADIZ ST #101
TALLAHASSEE, FL 32301 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition
300109183883
09/07/07--01012--023 ***300.00

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Eddie Spencer
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-24-07 850-224-8151
Date Daytime Phone #