

# **2009 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P94000057556

**FILED**  
**Nov 04, 2009**  
**Secretary of State**

**Entity Name:** M & M ENTERPRISES OF MORRISTON, INC.

**Current Principal Place of Business:**

3430 SW 53RD ST  
OCALA, FL 34474

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 3788  
BELLEVIEW, FL 34421

**New Mailing Address:**

604 NW 1ST AVE  
OCALA, FL 34475

**FEI Number:** 59-3258579

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MASCIARELLI, DEBRA  
3430 SW 53RD ST  
OCALA, FL 34474 US

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

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:** DEBRA MASCIARELLI

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:**

Title: P ( ) Delete  
Name: MASCIARELLI, WAYNE  
Address: 3430 SW 53RD ST  
City-St-Zip: OCALA, FL 34474

Title: V ( ) Delete  
Name: MASCIARELLI, WAYNE  
Address: 3430 SW 53RD ST  
City-St-Zip: OCALA, FL 34474

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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.

**SIGNATURE:** WAYNE MASCIARELLI

PRES

11/04/2009

Electronic Signature of Signing Officer or Director

Date