

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P94000079073

FILED  
Sep 20, 2006  
Secretary of State

Entity Name: DARTFORD ENTERPRISES, INC.

## Current Principal Place of Business:

1164 DARTFORD DR.  
TARPON SPRINGS, FL 34688

## New Principal Place of Business:

229 E LEMON ST  
TARPON SPRINGS, FL 34689 US

## Current Mailing Address:

1870 STARKEY RD  
SUITE 2  
LARGO, FL 33771 US

## New Mailing Address:

229 E LEMON ST  
TARPON SPRINGS, FL 34689 US

FEI Number: 59-3286000

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SVOBODA, E.J.  
1870 STARKEY RD  
SUITE 2  
LARGO, FL 33771 US

## Name and Address of New Registered Agent:

SVOBODA, E.J.  
229 E LEMON ST  
TARPON SPRINGS, FL 34689 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: E.J.SVOBODA

09/20/2006

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: PD ( ) Delete  
Name: SHINTON, A.H.  
Address: 1164 DARTFORD DR.  
City-St-Zip: TARPON SPRINGS, FL 34689

Title: VPD ( ) Delete  
Name: SVOBODA, E.J.  
Address: 1164 DARTFORD DR.  
City-St-Zip: TARPON SPRINGS, FL 34689

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: SVOBODA, EDWARD J MR  
Address: 229 E LEMON ST  
City-St-Zip: TARPON SPRINGS, FL 34689

Title: VPD (X) Change ( ) Addition  
Name: MINCEY, JOHN MR  
Address: 229 E LEMON ST  
City-St-Zip: TARPON SPRINGS, FL 34689

Title: ST ( ) Change (X) Addition  
Name: LADINO, PAUL MR  
Address: 229 E LEMON ST  
City-St-Zip: TARPON SPRINGS, FL 34689

I hereby certify that the information supplied with this filing does not qualify for the 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: E.J.SVOBODA

PD

09/20/2006

Electronic Signature of Signing Officer or Director

Date