

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P95000035537

FILED
Oct 06, 2005
Secretary of State

Entity Name: ANDERSON CO. OF PLANT CITY, INC.

Current Principal Place of Business:

241 S INDIANA AVE
ENGLEWOOD, FL 34223 US

New Principal Place of Business:

Current Mailing Address:

8 LONG MEADOW RD.
ROTONDA WEST, FL 33947

New Mailing Address:

FEI Number: 59-3317042

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANDERSON, MARK D
5304 CONNER TERR
PORT CHARLOTTE, FL 33981 US

Name and Address of New Registered Agent:

ANDERSON, MARK D
8 LONG MEADOW RD
ROTONDA WEST, FL 33947 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: MARK ANDERSON

10/06/2005

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: VP () Delete
Name: ANDERSON, DAVID B
Address: 401-B HOWARD AVENUE
City-St-Zip: LAKELAND, FL 33802

Title: P () Delete
Name: ANDERSON, MARK D
Address: 8 LONG MEADOW RD.
City-St-Zip: ROTONDA WEST, FL 33947

Title: ST () Delete
Name: ANDERSON, LYNN D
Address: 8 LONG MEADOW RD.
City-St-Zip: ROTONDA WEST, FL 33947

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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 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: MARK ANDERSON

PRES

10/06/2005

Electronic Signature of Signing Officer or Director

Date