

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P95000060615

1. Entity Name
DESROSIERS BROTHERS ENTERPRISES, INC.



FILED

2007 JAN 23 PM 1:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
~~2500 WHITFIELD AVENUE~~
~~SARASOTA, FL 34243~~

Mailing Address
~~2500 WHITFIELD AVENUE~~
~~SARASOTA, FL 34243~~

2. Principal Place of Business

5524 SAILFISH COURT

3. Mailing Address

2381 FRUITVILLE RD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

PUNTA GORDA, FL

City & State

SARASOTA, FL

Zip
33482

Country

Zip

34237

Country

01092007

REIN-P

CR2E098 (11/05)

4. FEI Number

65-0650165

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PENDER JR, MICHAEL R
2381 FRUITVILLE RD
SARASOTA, FL 34237

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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	SD DESROSIERS, JAMES	☐ Delete
STREET ADDRESS CITY - ST - ZIP	1224 SHEEHAN BLVD PORT CHARLOTTE, FL	
TITLE NAME	PD DESROSIERS, STEVEN C	☐ Delete
STREET ADDRESS CITY - ST - ZIP	5524 SAILFISH CT. PUNTA GORDA, FL	
TITLE NAME	VD DESROSIERS, NORMAN C	☐ Delete
STREET ADDRESS CITY - ST - ZIP	4315 HOMEWOOD ST. CHARLOTTE HARBOR, FL	
TITLE NAME		☐ Delete
STREET ADDRESS CITY - ST - ZIP		
TITLE NAME		☐ Delete
STREET ADDRESS CITY - ST - ZIP		
TITLE NAME		☐ Delete
STREET ADDRESS CITY - ST - ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME		☒ Change ☐ Addition
STREET ADDRESS CITY - ST - ZIP	114 PARADISE DRIVE HENDERSONVILLE, TN 37075	
TITLE NAME		☐ Change ☐ Addition
STREET ADDRESS CITY - ST - ZIP		
TITLE NAME		☐ Change ☐ Addition
STREET ADDRESS CITY - ST - ZIP	600086469566 01/30/07--01004--006 ***300.00	
TITLE NAME	D PENDER, MICHAEL R. JR	☐ Change ☒ Addition
STREET ADDRESS CITY - ST - ZIP	2381 FRUITVILLE ROAD SARASOTA, FL 34237	
TITLE NAME		☐ Change ☐ Addition
STREET ADDRESS CITY - ST - ZIP		
TITLE NAME		☐ Change ☐ Addition
STREET ADDRESS CITY - ST - ZIP		

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 empowerments.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

1-23-07

941-366-2983