

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P96000014429

Entity Name: SILVERADO L.L.C. INC.

FILED
Jan 10, 2005
Secretary of State

Current Principal Place of Business:

6400 NORTH W STREET
PENSACOLA, FL 32505

New Principal Place of Business:

Current Mailing Address:

6400 NORTH W STREET
PENSACOLA, FL 32505

New Mailing Address:

FEI Number: 59-3360114

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHASE, JAMES L
101 E. GOVERNMENT ST.
PENSACOLA, FL 32501 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: JAMES L CHASE

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: ALTMAN, JAMES B
Address: 6429 CORWALL CIRCLE
City-St-Zip: INDIANAPOLIS, IN 46256

Title: V () Delete
Name: EVANS, WILLIE
Address: 6400 NORTH W STREET
City-St-Zip: PENSACOLA, FL 32505

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 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: JAMES B ALTMAN

P

01/10/2005

Electronic Signature of Signing Officer or Director

Date