

# **2005 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P96000046060

Entity Name: C. MELVIN SMITH ENTERPRISES, INC.

**FILED**  
**Apr 21, 2005**  
**Secretary of State**

**Current Principal Place of Business:**

203 CHAPEL DR.  
TALLAHASSEE, FL 32304

**New Principal Place of Business:**

**Current Mailing Address:**

203 CHAPEL DR.  
TALLAHASSEE, FL 32304

**New Mailing Address:**

FEI Number: 59-3385875

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

O'STEEN, J. C.  
177 SALEM CT.  
TALLAHASSEE, FL 32301 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: J. C. O'STEEN

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: SMITH, C. MELVIN  
Address: 203 CHAPEL DR.  
City-St-Zip: TALLAHASSEE, FL 32304

Title: VD ( ) Delete  
Name: DUNLAP, THOMAS G  
Address: 3021 FAIRVIEW DRIVE  
City-St-Zip: TALLAHASSEE, FL 32304

Title: SD ( ) Delete  
Name: KORNEGAY, JAMES D  
Address: 130 WHISPERING PINES  
City-St-Zip: TALLAHASSEE, FL 32310

**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: C. MELVIN SMITH

PRES

04/21/2005

Electronic Signature of Signing Officer or Director

Date