

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P97000052745

Entity Name: THE PENINSULA GROUP, INC.

FILED
Oct 14, 2005
Secretary of State

Current Principal Place of Business:

P.O. BOX 1438
WINTER HAVEN, FL 33882

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1438
WINTER HAVEN, FL 33882

New Mailing Address:

FEI Number: 59-3454234

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LINDSEY, TOM
116 LAKE OTIS RD
WINTER HAVEN, FL 33884 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: TOM LINDSEY

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: OBERMEYER, KEN
Address: 1715 SIR GEORGES TRAIL
City-St-Zip: LAKELAND, FL 33809

Title: CEO () Delete
Name: LINDSEY, TOM
Address: 181 LAKE OTIS RD
City-St-Zip: WINTER HAVEN, FL 33884

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: KEN OBERMEYER

PRES

10/14/2005

Electronic Signature of Signing Officer or Director

Date