## 2005 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P97000081084

Entity Name: SUN GLO ANTIQUES, INC.

FILED Oct 11, 2005 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

16319 SE COUNTRY RD 234 3370 NORTHEAST 86TH LANE

MICANOPY, FL 32667 ANTHONY, FL 32617

Current Mailing Address: New Mailing Address:

16319 SE COUNTRY RD 234 POST OFFICE BOX 113 MICANOPY, FL 32667 ANTHONY, FL 32617

FEI Number: 59-3469118 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

ROSSELLE, JOHN C
ROUTE 2, BOX 918
MICANOPY, FL 32667
US
ROSSELLE, JOHN C
POST OFFICE BOX 113
ANTHONY, FL 32667
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: JOHN C. ROSSELLE 10/11/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title:

P ( ) Delete Title: P (X) Change ( ) Addition

 Name:
 ROSELLE, JOHN C
 Name:
 ROSELLE, JOHN C

 Address:
 7958 N.W. 135TH STREET
 Address:
 POST OFFICE BOX 113

 City-St-Zip:
 REDDICK, FL 32686
 City-St-Zip:
 ANTHONY, FL 32617

Title: VPT () Delete Title: VPT (X) Change () Addition Name: ROSSELLE, SUSAN J Name: ROSSELLE, SUSAN J

Address: 7958 N.W. 135TH STREET Address: 2 SYCAMORE DRIVE
City-St-Zip: REDDICK, FL 32686 City-St-Zip: MIDDLEBORO, MA 02346

Title: S ( ) Delete Title: S (X) Change ( ) Addition

 Name:
 ROSSELLE, ANITA
 Name:
 ROSSELLE, ANITA

 Address:
 7958 N.W. 135TH STREET
 Address:
 POST OFFICE BOX 113

 City-St-Zip:
 REDDICK, FL 32686
 City-St-Zip:
 ANTHONY, FL 32617

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: JOHN C ROSSELLE P 10/11/2005