2004 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 25, 2004
Secretary of State

DOCUMENT# P98000034423

Entity Name: RIDGE-MOSS PROPERTIES, INC.

Current Principal Place of Business:

1160 W DESOTO ST
CLERMONT, FL 34711

New Principal Place of Business:

Current Mailing Address:

145 E. BROAD STREET,P.O. BOX 447
GROVELAND, FL 34736

New Mailing Address:

FEI Number: 59-3514899 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WYNN, W. SCOTT ESQUIRE
145 E. BROAD STREET
GROVELAND, FL 34736 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: ______________________________
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: DP ( ) Delete
Name: IRVIN, DAVID H
Address: 9123 MOSSY OAK LANE
City-St-Zip: CLERMONT, FL 34711

Title: DVP ( ) Delete
Name: GREEN, DOUGLAS
Address: 12604 LAKE RIDGE CIRCLE
City-St-Zip: CLERMONT, FL 34711

Title: ST ( ) Delete
Name: IRVIN, DAVID
Address: 9123 MOSSY OAK LANE
City-St-Zip: CLERMONT, FL 34711

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: DAVID IRVIN DP 10/25/2004
Electronic Signature of Signing Officer or Director Date