

# **2010 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P98000037741

**FILED**  
**Dec 22, 2010**  
**Secretary of State**

**Entity Name:** AFTER HOURS GARAGE OF OCALA INC

**Current Principal Place of Business:**

1101 NW 24TH AVE  
OCALA, FL 34475

**New Principal Place of Business:**

**Current Mailing Address:**

1101 NW 24TH AVE  
OCALA, FL 34475

**New Mailing Address:**

**FEI Number:** 59-3311328

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SNELL, ROBERT C  
1360 N 24TH AVE  
OCALA, FL 34475 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:** ROBERT SNELL

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** SNELL, ROBERT C  
**Address:** 1360 NW 24TH AVE  
**City-St-Zip:** OCALA, FL 34475

**Title:** VP  
**Name:** SNELL, THOMAS  
**Address:** 17160 SE 104 AVE  
**City-St-Zip:** SUMMERFIELD, FL 34491

**Title:** S  
**Name:** SNELL, MARCIA  
**Address:** PO BOX 2154  
**City-St-Zip:** OCALA, FL 34478

**Title:** T  
**Name:** SNELL, TIMOTHY  
**Address:** 1360 NW 24 AVE  
**City-St-Zip:** OCALA, FL 34475

I hereby 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 all other like empowered.

**SIGNATURE:** ROBERT SNELL

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

P

12/22/2010

\_\_\_\_\_  
Date