

# **2010 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P98000037788

**FILED**  
**Oct 12, 2010**  
**Secretary of State**

**Entity Name:** COUNTY APPROVED CARPENTRY, INC.

**Current Principal Place of Business:**

14219 MISSOURI SKYLARK ROAD  
BROOKSVILLE, FL 34614

**New Principal Place of Business:**

**Current Mailing Address:**

14219 MISSOURI SKYLARK ROAD  
BROOKSVILLE, FL 34614

**New Mailing Address:**

**FEI Number:** 59-3507319

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LONGARELLO, STEPHEN T  
14219 MISSOURI SKYLARK RD.  
BROOKSVILLE, FL 34614 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: STEPHEN T. LONGARELLO

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: LONGARELLO, STEPHEN T  
Address: 14219 MISSOURI SKYLARK RD.  
City-St-Zip: BROOKSVILLE, FL 34614

Title: T  
Name: LONGARELLO, DEBORAH  
Address: 14219 MISSOURI SKYLARK RD.  
City-St-Zip: BROOKSVILLE, FL 34614

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: STEPHEN T. LONGARELLO

PRES

10/12/2010

Electronic Signature of Signing Officer or Director

Date