## 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P98000108261

Entity Name: HAYS CASH DESIGN STUDIOS, INC.

FILED Oct 04, 2006 Secretary of State

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

26119 TROON AVE

MOUNT PLYMOUTH, FL 32776 PAISLEY, FL 32767

**Current Mailing Address: New Mailing Address:** 

26119 TROON AVE **BOX 790** 

MOUNT PLYMOUTH, FL 32776 PAISLEY, FL 32767

FEI Number: 59-3554938 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

CASH, PENNY HAYS, DOUGLAS L 26119 TROON AVE 43600 WOODACRE DRIVE

MOUNT PLYMOUTH, FL 32776 PAISLEY, FL 32767 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: DOUGLAS HAYS 10/04/2006

> 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: PRFS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete (X) Change ( ) Addition CASH, PENNY HAYS, DOUGLAS L Name: Name: 26119 TROON AVE PO BOX 790 Address: Address:

City-St-Zip: MOUNT PLYMOUTH, FL 32776 City-St-Zip: PAISLEY, FL 32767

Title: Title: VΡ () Delete (X) Change ( ) Addition Name: HAYS, DOUG Name: HILLMAN, DARIN J

26119 TROON AVE 626 N HIGHLAND DR Address: Address: MOUNT PLYMOUTH, FL 32776 MOUNT DORA, FL 32757 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: DOUGLAS HAYS **PRES** 10/04/2006