2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P99000015988

Entity Name: APOLLO RENOVATIONS & DEVELOPMENT, INC.

FILED Dec 15, 2004 Secretary of State

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

1134 SHIPWATCH CIRCLE 10500 WINE PALM ROAD TAMPA, FL 33602 FT. MYERS, FL 33912

Current Mailing Address: New Mailing Address:

1134 SHIPWATCH CIRCLE 10500 WINE PALM ROAD TAMPA, FL 33602 FT. MYERS, FL 33912

FEI Number: 59-3558527 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

POWERS, KEITH T
1134 SHIPWATCH CIRCLE
TAMPA, FL 33602 US
PFLUGNER, J. GEOFFREY ESQ.
2033 MAIN STREET
600
SARASOTA, FL 34237 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: J. GEOFFREY PFLUGNER 12/15/2004

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 POWERS, KEITH T
 Name:
 POWERS, KEITH T

 Address:
 1134 SHIPWATCH CIRCLE
 Address:
 10500 WINE PALM ROAD

 City St 7in:
 TAMPA EL 23203
 City St 7in:
 ET MYERS EL 232042

 City-St-Zip:
 TAMPA, FL 33602
 City-St-Zip:
 FT. MYERS, FL 33912

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

Name:Name:BUTTACAVOLI, JOSEPH AAddress:Address:10500 WINE PALM ROADCity-St-Zip:City-St-Zip:FT. MYERS, FL 33912

Title: SEC. () Change (X) Addition

 Name:
 Name:
 BUTTACAVOLI, JOSEPH A

 Address:
 Address:
 10500 WINE PALM ROAD

 City-St-Zip:
 City-St-Zip:
 FT. MYERS, FL 33912

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: J. GEOFFREY PFLUGNER RA 12/15/2004