

# **2014 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# S87117

**FILED**  
**Oct 13, 2014**  
**Secretary of State**

**Entity Name:** O'NEAL'S ROOFING CO. OF LAKE LAND, INC.

**Current Principal Place of Business:**

6950 BARBARA JEAN LN  
POLK CITY, FL 33868 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 595  
POLK CITY, FL 33868 US

**New Mailing Address:**

6950 BARBARA JEAN LN  
POLK CITY, FL 33868 US

**FEI Number:** 59-3012140

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

O'NEAL, ALICE  
6920 BARBARA JEAN LN  
POLK CITY, FL 33868 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: ALICE O' NEAL

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

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: O'NEAL, ALICE  
Address: 6920 BARBARA JEAN LN  
City-St-Zip: POLK CITY, FL 33868 US

Title: STD  
Name: O'NEAL, ALICE  
Address: 6920 BARBARA JEAN LN  
City-St-Zip: POLK CITY, FL 33868 US

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: ALICE O'NEAL

PRES

10/13/2014

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

\_\_\_\_\_  
Date