

# 2012 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000030792

**FILED**  
**Oct 11, 2012**  
**Secretary of State**

**Entity Name:** PABODY ENTERPRISES, INC.

**Current Principal Place of Business:**

5233 FOREST DRIVE  
GRACEVILLE, FL 32440 US

**New Principal Place of Business:**

**Current Mailing Address:**

5233 FOREST DRIVE  
GRACEVILLE, FL 32440 US

**New Mailing Address:**

**FEI Number:** 20-0741765

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BAKER, FRANK A  
4431 LAFAYETTE STREET  
MARIANNA, FL 32446 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: FRANK A. BAKER

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

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: PABODY, STEVE G  
Address: 5233 FOREST DRIVE  
City-St-Zip: GRACEVILLE, FL 32440 US

Title: VPD  
Name: PABODY, STEVE  
Address: 5233 FOREST DRIVE  
City-St-Zip: GRACEVILLE, FL 32440 US

Title: STD  
Name: PABODY, HAZEL  
Address: 5233 FOREST DRIVE  
City-St-Zip: GRACEVILLE, FL 32440 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: STEVE PABODY

PD

10/11/2012

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

\_\_\_\_\_  
Date