2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Jan 02, 2007
Secretary of State

DOCUMENT# N03000000188

Entity Name: GWENANDREWS, INCORPORATED

Current Principal Place of Business:

116 NORTH MADISON STREET
QUINCY, FL 32351

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 6225
TALLAHASSEE, FL 32314

New Mailing Address:

FEI Number: 81-0637118 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BUTLER, EUREKA A
2741 OAK PARK COURT
TALLAHASSEE, FL 32308 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: EUREKA BUTLER
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: OFAUNI, REGINALD
Address: 1900 VINEYARD LANE
City-St-Zip: TALLAHASSEE, FL 32317

Title: VP ( ) Delete
Name: ANDREWS, JEROME
Address: 88 ROZENA LOOP
City-St-Zip: HAVANA, FL 32333

Title: S ( ) Delete
Name: BOYER, DOROTHY
Address: 1917 FAULK DRIVE
City-St-Zip: TALLAHASSEE, FL 32303

Title: D ( ) Delete
Name: BUTLER, EUREKA
Address: 2741 OAK PARK COURT
City-St-Zip: TALLAHASSEE, FL 32308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: REGINAL OFAUNI V 01/02/2007
Electronic Signature of Signing Officer or Director — Date