2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000138219

Entity Name: WERSORGER, INC

FILED Jan 18, 2006 Secretary of State

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

12552 BISCAYNE LAKE DR 11686 JACOB LOIS CT JACKSONVILLE, FL 32218 JACKSONVILLE, FL 32218

Current Mailing Address: New Mailing Address:

12552 BISCAYNE LAKE DR 11686 JACOB LOIS CT JACKSONVILLE, FL 32218 JACKSONVILLE, FL 32218

FEI Number: 20-1738229 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MITCHELL, ROBERT L MR
12552 BISCAYNE LAKE DR
JACKSONVILLE, FL 32218 US

MITCHELL, ROBERT L MR
11686 JACOB LOIS CT
JACKSONVILLE, FL 32218 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: ROBERT L MITCHELL 01/18/2006

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition MITCHELL, ROBERT MITCHELL, ROBERT L Name: Name: 12552 BISCAYNE LAKE DR 11686 JACOB LOIS CT Address: Address: City-St-Zip: JACKSONVILLE, FL 32218 City-St-Zip: JACKSONVILLE, FL 32218

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

Name: DUCK, DENNIS Name: HALL, KEVIN L

 Address:
 12552 BISCAYNE LAKE DR
 Address:
 1612 SHEARWATER DR

 City-St-Zip:
 JACKSONVILLE, FL 32218
 City-St-Zip:
 JACKSONVILLE, FL 32218

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

 Name:
 Name:
 MORRIS, ALBERT E

 Address:
 Address:
 9745 MACARTHUR CT. S.

 City-St-Zip:
 City-St-Zip:
 JACKSONVILLE, FL 32246

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: ROBERT L MITCHELL DIR 01/18/2006