

# 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000078557

**FILED**  
**Mar 28, 2007**  
**Secretary of State**

**Entity Name:** B & B MODULAR SERVICES, INC.

**Current Principal Place of Business:**

12920 AMBER AVE  
CLERMONT, FL 34711 US

**New Principal Place of Business:**

**Current Mailing Address:**

1373 QUINCY RD  
FLORENCE, SC 29506 US

**New Mailing Address:**

**FEI Number:** 20-2924052

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TEDDER, BEN  
12920 AMBER AVE  
CLERMONT, FL 34711 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: BEN TEDDER

\_\_\_\_\_  
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:**

Title: P D ( ) Delete  
Name: TEDDER, BEN  
Address: 12920 AMBER AVE  
City-St-Zip: CLERMONT, FL 34711 US

Title: S ( ) Delete  
Name: BROWN, JAIME  
Address: 12920 AMBER AVE  
City-St-Zip: CLERMONT, FL 34711 US

Title: T ( ) Delete  
Name: HUTCHINSON, BETTY  
Address: 1373 QUINCY RD  
City-St-Zip: FLORENCE, SC 29506 US

**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:

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: BEN TEDDER

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

PD

03/28/2007

\_\_\_\_\_  
Date