

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000100678

Entity Name: HONEYS DO ALL, INC

FILED
Apr 12, 2008
Secretary of State

Current Principal Place of Business:

685 OLIVER STREET WEST
BALDWIN, FL 32234

New Principal Place of Business:

Current Mailing Address:

685 OLIVER STREET WEST
BALDWIN, FL 32234

New Mailing Address:

FEI Number: 20-5343956

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOSLEY, PAULA
685 OLIVER STREET WEST
BALDWIN, FL 32234 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: PAULA MOSLEY

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: MOSLEY, PAULA
Address: 685 OLIVER STREET WEST
City-St-Zip: BALDWIN, FL 32234

Title: VP/D (X) Delete
Name: MALENFANT, KIM
Address: 10775 NORMANDY BLVD
City-St-Zip: JACKSONVILLE, FL 32234

Title: S/D () Delete
Name: MOSLEY, JOHN
Address: 685 OLIVER STREET WEST
City-St-Zip: BALDWIN, FL 32234

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 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: PAULA MOSLEY

Electronic Signature of Signing Officer or Director

P

04/12/2008

Date