

2009 FOR PROFIT CORPORATION REINSTATEMENT

**FILED
Oct 18, 2009
Secretary of State**

DOCUMENT# P21314

Entity Name: LANGFORD CONSTRUCTION COMPANY INCORPORATED

Current Principal Place of Business:

314 GREENVILLE STREET
LAGRANGE, GA 30240

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1287
LAGRANGE, GA 30241 US

New Mailing Address:

FEI Number: 58-1237698 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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: CT CORPORATION SYSTEM

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: CFO () Delete
Name: LANGFORD, STEVEN E.
Address: 726 CHEROKEE
City-St-Zip: LAGRANGE, GA 30240

Title: PD () Delete
Name: LANGFORD, A. PHILIP
Address: 186 PINE TREE DRIVE
City-St-Zip: LAGRANGE, GA 30240

Title: CS () Delete
Name: TURNER, JANET
Address: 105 FORD DR
City-St-Zip: LAGRANGE, GA 30240

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: JANET C. TURNER

CS

10/18/2009

Electronic Signature of Signing Officer or Director

Date