

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 176774

FILED
Oct 03, 2008
Secretary of State

Entity Name: WEEKES & CALLAWAY, INC.

Current Principal Place of Business:

3945 W ATLANTIC AVE.
DELRAY BEACH, FL 33435 US

New Principal Place of Business:

3945 W ATLANTIC AVE.
DELRAY BEACH, FL 33445 US

Current Mailing Address:

3945 W ATLANTIC AVE.
DELRAY BEACH, FL 33435 US

New Mailing Address:

3945 W ATLANTIC AVE.
DELRAY BEACH, FL 33445 US

FEI Number: 59-0714699

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WEEKES, LEON
777 E ATLANTIC AVE #300
DELRAY BEACH, FL 33483 US

Name and Address of New Registered Agent:

WEEKES, LEON A
3945 W ATLANTIC AVE
DELRAY BEACH, FL 33445 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: LEON A. WEEKES

10/03/2008

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: PRES () Delete
Name: CALLAWAY, J. MICHAEL,
Address: 777 E. ATLANTIC AVE #300
City-St-Zip: DELRAY BCH FL 00000, FL 33483

Title: CD () Delete
Name: WEEKES, LEON M,
Address: 777 E ATLANTIC AVE #300
City-St-Zip: DELRAY BCH, FL 00000, FL 33483

Title: CEO () Delete
Name: WEEKES, LEON A,
Address: 777 E ATLANTIC AVE #300
City-St-Zip: DELRAY BCH, FL 00000, FL 33483

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: CALLAWAY, MICHAEL J
Address: 3945 WEST ATLANTIC AVE.
City-St-Zip: DELRAY BCH, FL 33445

Title: CD (X) Change () Addition
Name: WEEKES, LEON M
Address: 3945 W ATLANTIC AVE
City-St-Zip: DELRAY BCH, FL 33445

Title: CEO (X) Change () Addition
Name: WEEKES, LEON A
Address: 3945 W ATLANTIC AVE
City-St-Zip: DELRAY BEACH, FL 33445

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: LEON A WEEKES

CEO

10/03/2008

Electronic Signature of Signing Officer or Director

Date