

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 531884

FILED
Sep 07, 2005
Secretary of State

Entity Name: CUSTOM ASSOCIATES, INC.

Current Principal Place of Business:

897 DAYTONA DR
PALM BAY, FL 32905

New Principal Place of Business:

Current Mailing Address:

897 DAYTONA DR
PALM BAY, FL 32905

New Mailing Address:

FEI Number: 59-1733488

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOVEL, DWIGHT E
159 MEMORY LANE
PALM BAY, FL 32907 US

Name and Address of New Registered Agent:

DOVEL, DWIGHT E
2822 WRIGHT AVE
MELBOURNE, FL, FL 32935 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: DWIGHT E. DOVEL

09/07/2005

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: PD () Delete
Name: DOVEL, DWIGHT E.,
Address: 159 MEMORY LANE
City-St-Zip: PALM BAY, FL

Title: SD () Delete
Name: DOVEL, JEAN
Address: 897 DAYTONA DRIVE NE
City-St-Zip: PALM BAY, FL

Title: D (X) Delete
Name: BUCK, JAMES
Address: 118 BARNACLE PLACE
City-St-Zip: ROCKLEDGE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DOVEL, DWIGHT E.,
Address: 2822 WRIGHT AVE
City-St-Zip: MELBOURNE, FL 32935 US

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 Section 119.07(3)(i), 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: DWIGHT E. DOVEL

PD

09/07/2005

Electronic Signature of Signing Officer or Director

Date