2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F94000002755

FILED Oct 21, 2004 Secretary of State

Entity Name: GENERAL MANUFACTURED HOUSING, INC. **Current Principal Place of Business: New Principal Place of Business:** P.O. BOX 1449 P.O. BOX 1449 WAYCROSS, GA 31501 2255 INDUSTRIAL BOULEVARD WAYCROSS, GA 31501 **Current Mailing Address: New Mailing Address:** P.O. BOX 1449 WAYCROSS, GA 31501 FEI Number: 58-1766193 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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: 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: CFOP () Delete () Change () Addition TRUSLOW, EDWARD Name: Name: 3 SAWMILL ROAD Address: Address: City-St-Zip: WESTON, CT 06883 City-St-Zip: Title: SD Title: () Delete (X) Change () Addition Name: HARRIS, MICHAEL Name: BRADSHAW, OLIVER D 1110 BLUFFHAVEN WAY 2046 EAST BAKER HIGHWAY Address: Address: ATLANTA, GA 30319 City-St-Zip: City-St-Zip: DOUGLS, GA 31503 Title: Title: (X) Delete () Change () Addition BARBER, JACK Name: Name: 362 CHEROKEE AVENUE Address: Address: City-St-Zip: WAYCROSS, GA 31501 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: OLIVER D BRADSHAW CFO 10/21/2004