

# 2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F97000000618

Entity Name: GULF SAND & GRAVEL, INC.

FILED  
Oct 20, 2005  
Secretary of State

## Current Principal Place of Business:

P.O. BOX 4810  
GULF SHORES, AL 36547

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 4810  
GULF SHORES, AL 36547

## New Mailing Address:

FEI Number: 63-1100736

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH 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: C T CORPORATION SYSTEM ON FILE

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: PCD ( ) Delete  
Name: NEMER, EDWARD L  
Address: 224-E PROFESSIONAL CT.  
City-St-Zip: GULF SHORES, AL 36542

Title: VCD ( ) Delete  
Name: NEMER, GREGORY E  
Address: 224-E PROFESSIONAL CT.  
City-St-Zip: GULF SHORES, AL 36542

Title: T ( ) Delete  
Name: NEMER, EDWARD L  
Address: 224-E PROFESSIONAL CT.  
City-St-Zip: GULF SHORES, AL 36542

Title: S ( ) Delete  
Name: WARD, SHERIAN  
Address: 437 WEST 22ND AVENUE  
City-St-Zip: GULF SHORES, AL 36542

## 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:

Title: S (X) Change ( ) Addition  
Name: CAIN, SHERIAN  
Address: 437 WEST 22ND AVENUE  
City-St-Zip: GULF SHORES, AL 36542

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: EDWARD L. NEMER

PCD

10/20/2005

Electronic Signature of Signing Officer or Director

Date