2009 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 14, 2009
Secretary of State

DOCUMENT# J21341

Entity Name: BEAVERS' AUTO CENTER, INC.

Current Principal Place of Business:

1609 S. MONROE STREET
TALLAHASSEE, FL 32301

New Principal Place of Business:

Current Mailing Address:

1609 S. MONROE STREET
TALLAHASSEE, FL 32301

New Mailing Address:

FEI Number: 59-2368852 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HARTSFIELD, PAUL F., JR.
211 S. GADSDEN STREET
TALLAHASSEE, FL 32301 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: R.E. ASHMORE

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: P ( ) Delete
Name: BEAVERS, JAMES E
Address: 1609 S. MONROE STREET
City-St-Zip: TALLAHASSEE, FL 32301

Title: VP ( ) Delete
Name: ASHMORE, JUNE
Address: 430 E COLLEGE AVE
City-St-Zip: TALLAHASSEE, FL

Title: VP ( ) Delete
Name: BEAVERS, SHIRLEY H
Address: 1609 S. MONROE STREET
City-St-Zip: TALLAHASSEE, FL 32301

Title: ST ( ) Delete
Name: ASHMORE, R E
Address: 430 E COLLEGE AVE
City-St-Zip: TALLAHASSEE, FL

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: ( ) 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: R.E. ASHMORE ST 10/14/2009

Electronic Signature of Signing Officer or Director Date