2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# L98380

Entity Name: CON-SUR, INC.

FILED Nov 16, 2007 Secretary of State

Littly Na	iiie. CON-30	K, INO.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
P.O. BOX 2774 WINTER HAVEN, FL 338839774				4413 OLD EAGLE LK. RD .EAGLE LAKE, FL 33830	
Current Mailing Address:			New Mailing Address	New Mailing Address:	
P.O. BOX 2774 WINTER HAVEN, FL 338839774			P.O. BOX .847 EAGLE LK., FL 33839		
FEI Number	: 59-3024104	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
255 MAGN	HN, RICHARD NOLIA AVE. HAVEN, FL 33				
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATU	RE: SHELDC	N MCVAY			
	Electro	nic Signature of Registered Age	ent	Date	
		3(2)(b), F.S., the corporation did no g Trust Fund Contribution ().	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D (MCVAY, BRUC 4413 OLD EAC BARTOW, FL	•	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (MCVAY, ROXA 4413 OLD EAC BARTOW, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	V (SHELDON C. N) Delete //CVAY.	Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: SHELDON MCVAY V.P. 11/16/2007

4413 OLD EAGLE LAKE RD.

BARTOW, FL

Address: City-St-Zip: