

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# M76325

**FILED**  
**Oct 04, 2011**  
**Secretary of State**

**Entity Name:** CENTRAL STATE CONSTRUCTION, INC.

**Current Principal Place of Business:**

17133 NE HWY 27-A  
WILLISTON, FL 32696

**New Principal Place of Business:**

439 S.E 54TH COURT  
OCALA, FL 34480

**Current Mailing Address:**

17133 NE HWY 27-A  
WILLISTON, FL 32696

**New Mailing Address:**

439 S.E 54TH COURT  
OCALA, FL 34480

**FEI Number:** 59-2906547

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

COMPUTERIZED ACCOUNTING & TAX SPECIALIST,  
3405 SW COLLEGE ROAD  
STE #221  
OCALA, FL 34474 US

**Name and Address of New Registered Agent:**

F.S.- GRIFFIS, YVONNE M  
439 S.E 54TH COURT  
OCALA, FL 34480 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: YVONNE M. F.S- GRIFFIS

10/04/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PST  
Name: GRIFFIS, EDWIN E  
Address: 439 SE 54TH COURT  
City-St-Zip: OCALA, FL 34480

Title: VP  
Name: F.S.- GRIFFIS, YVONNE M  
Address: 439 SE 54TH COURT  
City-St-Zip: OCALA, FL 34480

I hereby 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 all other like empowered.

SIGNATURE: YVONNE M. F.S- GRIFFIS

V.P

10/04/2011

Electronic Signature of Signing Officer or Director

Date