

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000010808

FILED
Jan 13, 2008
Secretary of State

Entity Name: WORTHY WILSON RESIDENTIAL HOMES INC.

Current Principal Place of Business:

1713 JULIAN LANE
TAMPA, FL 33619

New Principal Place of Business:

Current Mailing Address:

10501 SKYLARK PLACE
RIVERVIEW, FL 33569

New Mailing Address:

P.O. BOX 934
RIVERVIEW, FL 33569

FEI Number: 20-5545400

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POLLOCK, JEANELLA O
10501 SKYLARK PLACE
RIVERVIEW, FL 33569 US

Name and Address of New Registered Agent:

POLLOCK, JEANELLA O
1713 JULIAN
TAMPA, FL 33619 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: JEANELLA POLLOCK

01/13/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: POLLOCK, JEANELLA
Address: 1713 JULIAN LANE
City-St-Zip: TAMPA, FL 33619

Title: VP () Delete
Name: POLLOCK, LEON A
Address: 1713 JULIAN LANE
City-St-Zip: TAMPA, FL 33619

Title: BOM () Delete
Name: WILSON, OSCAR
Address: 1713 JULIAN LANE
City-St-Zip: TAMPA, FL 33619

Title: BOM () Delete
Name: ZEIGLER, GEORGE
Address: 1713 JULIAN LANE
City-St-Zip: TAMPA, FL 33619

Title: BOM () Delete
Name: TOWNSEND, DWIGHT
Address: 1713 JULIAN LANE
City-St-Zip: TAMPA, FL 33619

Title: BOM () Delete
Name: DANIELS, KIM
Address: 1713 JULIAN LANE
City-St-Zip: TAMPA, FL 33619

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:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JEANELLA POLLOCK

DIR

01/13/2008

Electronic Signature of Signing Officer or Director

Date