

# 2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N97000002253

FILED  
Nov 12, 2008  
Secretary of State

Entity Name: REBUILD, INC.

## Current Principal Place of Business:

4255 STURGEON DR  
SEBRING, FL 33870 US

## New Principal Place of Business:

## Current Mailing Address:

4255 STURGEON DRIVE  
SEBRING, FL 33870 US

## New Mailing Address:

FEI Number: 65-0754055      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

MCCRAY, BELINDA J  
4255 STURGEON DR.  
SEBRING, FL 33870 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: BELINDA J. MCCRAY

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: MCCRAY, BELINDA J  
Address: 4255 STURGEON DR.  
City-St-Zip: SEBRING, FL 33870

Title: VD ( ) Delete  
Name: WALKER, MAGGIE T  
Address: 1135 GRAND AVENUE  
City-St-Zip: SEBRING, FL 33870

Title: SD ( ) Delete  
Name: THOMPSON, LOWANDA M  
Address: 307 ROBIN AVENUE  
City-St-Zip: SEBRING, FL 33872

Title: TD ( ) Delete  
Name: PATTERSON, MARK  
Address: 1518 WOOD VIOLET DR  
City-St-Zip: ORLAND, FL 33824

## 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: TD (X) Change ( ) Addition  
Name: PATTERSON, MARK T  
Address: 1518 WOOD VIOLET DR  
City-St-Zip: ORLAND, FL 33824

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: BELINDA J. WALKER

PD

11/12/2008

Electronic Signature of Signing Officer or Director

Date