2005 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Jul 22, 2005
Secretary of State

DOCUMENT# P00000039205

Entity Name: MARK LOKERSON MASONRY CONSTRUCTION, INC.

Current Principal Place of Business:

1600 MARINA BAY DR
#303
DELRAY BEACH, FL 33444

New Principal Place of Business:

1600 MARINA BAY DR
#303
PANAMA CITY, FL 32409

Current Mailing Address:

1600 MARINA BAY DR
#303
DELRAY BEACH, FL 33444

New Mailing Address:

1600 MARINA BAY DR
#303
PANAMA CITY, FL 32409

FEI Number: 59-3649085 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LOKERSON, MARK
906 MALLORY DRIVE
PANAMA CITY, FL 32405 US

Name and Address of New Registered Agent:

LOKERSON, MARK
1600 MARINA BAY DRIVE
303
PANAMA CITY, FL 32409 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: MARK A. LOKERSON 07/22/2005
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: LOKERSON, MARK
Address: 906 MALLORY DR
City-St-Zip: PANAMA CITY, FL 32405

Title: ST ( ) Delete
Name: LOKERSON, GERTRUDE
Address: 906 MALLORY DR
City-St-Zip: PANAMA CITY, FL 32405

Title: VP (X) Delete
Name: ELLIS, GARY
Address: 826 NEWYORK AVE
City-St-Zip: LYNN HAVEN, FL 32444

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: LOKERSON, MARK
Address: 1600 MARINA BAY DRIVE
City-St-Zip: PANAMA CITY, FL 32409

Title: SEC (X) Change ( ) Addition
Name: LOKERSON, GERTRUDE
Address: 1600 MARINA BAY DRIVE
City-St-Zip: PANAMA CITY, FL 32409

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MARK A. LOKERSON PRES 07/22/2005
Electronic Signature of Signing Officer or Director Date