

2009 FOR PROFIT CORPORATION REINSTATEMENT

**FILED
Dec 04, 2009
Secretary of State**

DOCUMENT# P00000090417

Entity Name: SHIVERS' EXEMPT XPRESS, INC.

Current Principal Place of Business:

204 W. HOPEWELL MANOR
PLANT CITY, FL 33567

New Principal Place of Business:

Current Mailing Address:

204 W. HOPEWELL MANOR
PLANT CITY, FL 33567

New Mailing Address:

FEI Number: 59-3674507 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHIVERS, JOHN E PRES.
204 W. HOPEWELL MANOR
PLANT CITY, FL 33567 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: RONALD D SHIVERS

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: OP () Delete
Name: SHIVERS, SR., JOHN E P
Address: 204 W. HOPEWELL MANOR
City-St-Zip: PLANT CITY, FL 33567

Title: VT () Delete
Name: SHIVERS, RONALD D V
Address: 204 W. HOPEWELL MANOR
City-St-Zip: PLANT CITY, FL 33567

Title: S () Delete
Name: SHIVERS, JR., JOHN E S
Address: 204 W HOPEWELL MANOR RD.
City-St-Zip: PLANT CITY, FL 33567

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:

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.

SIGNATURE: RONALD D SHIVERS

Electronic Signature of Signing Officer or Director

VT

12/04/2009

Date