

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P00000117297

Entity Name: K & M ACCENT BUILDERS, INC.

FILED  
Dec 19, 2006  
Secretary of State

## Current Principal Place of Business:

505-H MOUNTAIN DR.  
DESTIN, FL 32541

## New Principal Place of Business:

## Current Mailing Address:

505-H MOUNTAIN DR.  
DESTIN, FL 32541

## New Mailing Address:

FEI Number: 59-3690973

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JOHNSON, KEITH  
509 KELLY ST.  
DESTIN, FL 32541 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: KEITH JOHNSON

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SPICER, MICHAEL  
Address: 505-H MOUNTAIN DR.  
City-St-Zip: DESTIN, FL 32541

Title: V ( ) Delete  
Name: JOHNSON, KEITH  
Address: 509 KELLY ST.  
City-St-Zip: DESTIN, FL 32541

Title: S ( ) Delete  
Name: JOHNSON, TINA  
Address: 509 KELLY ST.  
City-St-Zip: DESTIN, FL 32541

Title: T ( ) Delete  
Name: JOHNSON, TINA  
Address: 509 KELLY ST.  
City-St-Zip: DESTIN, FL 32541

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: JOHNSON, KEITH  
Address: 509 KELLY STREET  
City-St-Zip: DESTIN, FL 32541

Title: V (X) Change ( ) Addition  
Name: JOHNSON, KEITH  
Address: 509 KELLY STREET  
City-St-Zip: DESTIN, FL 32541

Title: S (X) Change ( ) Addition  
Name: JOHNSON, TINA  
Address: 509 KELLY STREET  
City-St-Zip: DESTIN, FL 32541

Title: T (X) Change ( ) Addition  
Name: JOHNSON, TINA  
Address: 509 KELLY STREET  
City-St-Zip: DESTIN, FL 32541

I hereby certify that the information supplied with this filing does not qualify for the 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: KEITH JOHNSON

Electronic Signature of Signing Officer or Director

P

12/19/2006

Date