2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000096270

Entity Name: S&S JOHNSTON ENTERPRISES, INC.

FILED Oct 18, 2005 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
120 W. 6TH AVE WINDERMERE, FL 34786				7700 HIDDEN IVY CT. ORLANDO, FL 32819			
Current Mailing Address:				New Mailing Address:			
120 W. 6TH AVE WINDERMERE, FL 34786			7700 HIDDEN IVY CCT. ORLANDO, FL 32819				
FEI Number: 59-3746412 FEI Number Applied For ()		FEI Num	umber Not Applicable ()		Certificate of Status Desired ()		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:							
7700 HIDDEN IVY CT ORLANDO, FL 32819 US The above named entity submits this statement for the purpose of				JOHNSTON, SUZANNE P PRESIDE 7700 HIDDEN IVY CT ORLANDO, FL 32819 US f changing its registered office or registered agent, or both,			
in the State of Florida.							
SIGNATURE: SUZANNE JOHNSTON Electronic Signature of Registered Agent				10/18/2005 Date			
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the p Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS: AD					e prior notice. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PD () JOHNSTON, SUZ 7700 HIDDEN IV ORLANDO, FL	YCT		Title: Name: Address: City-St-Zip:	` '		
Title: Name: Address: City-St-Zip:	VD () JOHNSTON, STE 7700 HIDDEN IV ORLANDO, FL	YCT		Title: Name: Address: City-St-Zip:	VP (X) JOHNSTON, ST 7700 HIDDEN I ORLANDO, FL	VY CT	
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:			
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	VP () JOHNSTON, ST 7700 HIDDEN I ORLANDO, FL	VY CT.	
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:			
Title: Name: Address: City-St-Zip:	()	Delete		Title: 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: SUZANNE JOHNSTON P 10/18/2005