2006 FOR PROFIT CORPORATION RÉINSTATEMENT

FILED **DOCUMENT # P01000117641** 2006 OCT 23 PM 1:48 LLOYD'S ELECTRIC & CONSTRUCTION CO. SECRETARY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address **1609 FLORIDA STREET** 1609 FLORIDA STREET DAYTONA BEACH, FL 32114 DAYTONA BEACH, FL 32114 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 10122006 REIN-P CR2E098 (11/05) City & State City & State Applied For 4. FEI Number 81-0639233 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name LLOYD, MERRELL C Street Address (P.O. Box Number is Not Acceptable) 1607 FLORIDA STREET DAYTONA BEACH, FL 32114-1408 City Zip Code FL 8. 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. I am familiar with, and accept the obligations of registered age SIGNATURE sture, typed or printed name of registered agent and title if applicab DATE FILE NOW!!! FEE IS \$150.00 in accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. After January 1, 2007, Fee will be \$300.00 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. TITLE ☐ Delete TITLE ☐ Change LLOYD, MERRELL C NAME 700081121497 /23/06-01052-011 ***15 STREET ADDRESS 1609 FLORIDA STREET STREET ADDRESS **150.00 CITY-ST-ZIP DAYTONA BEACH, FL 32114 CITY-ST-ZIP Delete Change ☐ Addition LLOYD, WILLIE MAE MALE STREET ADDRESS 1609 FLORIDA STREET STREET ADDRESS CITY-ST-ZIP DAYTONA BEACH, FL 32114 CITY-ST-ZP ST ☐ Delete TELLE DTLE [] Change ■ Addition LLOYD, CYNTHIA B NAME NAME STREET ADDRESS 1609 FLORIDA STREET STREET ADDRESS CITY-ST-7/P CITY-ST-ZIP DAYTONA BEACH, FL 32114 VΡ Delete TIBLE TITLE Change | ☐ Addition LLOYD, MERRELL L NAME NAME STREET ADORESS 1609 FLORIDA STREET STREET ADDRESS DAYTONA BEACH, FL 32114 CITY-ST-ZIP CITY+ST-ZIP ☐ Defete ☐ Addition TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Addition TITLE TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. Thereby certify that the information supplied with this fitting does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.