

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000015611

FILED  
Oct 20, 2009  
Secretary of State

Entity Name: AMERICAN CLASSIC BUILDERS, INC.

## Current Principal Place of Business:

4506 LAKE FOX PL.  
PARRISH, FL 34219

## New Principal Place of Business:

## Current Mailing Address:

4506 LAKE FOX PL.  
PARRISH, FL 34219

## New Mailing Address:

FEI Number: 32-0001624

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SLOAT, BRETT  
4506 LAKE FOX PL.  
PARRISH, FL 34219 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: BRETT SLOAT

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: MR ( ) Delete  
Name: SLOAT, BRETT  
Address: 4506 LAKE FOX PL.  
City-St-Zip: PARRISH, FL 34219

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MR (X) Change ( ) Addition  
Name: SLOAT, BRETT M  
Address: 4506 LAKE FOX PL.  
City-St-Zip: PARRISH, FL 34219 US

Title: MR ( ) Change (X) Addition  
Name: SLOAT, BRETT M  
Address: 4506 LAKE FOX PL.  
City-St-Zip: PARRISH, FL 34219 US

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Title: MR ( ) Change (X) Addition  
Name: SLOAT, BRETT M  
Address: 4506 LAKE FOX PL.  
City-St-Zip: PARRISH, FL 34219 US

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: BRETT SLOAT

Electronic Signature of Signing Officer or Director

PRES

10/20/2009

Date