

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000035138

FILED
Sep 18, 2006
Secretary of State

Entity Name: D&D ASPHALT PAVING & REPAIR, INC.

Current Principal Place of Business:

3622 N E JACKSONVILLE RD
OCALA, FL 34478

New Principal Place of Business:

Current Mailing Address:

3622 N E JACKSONVILLE RD
OCALA, FL 34478

New Mailing Address:

FEI Number: 30-0090997

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DODSON, TIA M
3622 NE JACKSONVILLE RD
OCALA, FL 34478 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: TIA M DODSON

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: PTD () Delete
Name: DODSON, IRA T
Address: 3622 N E JACKSONVILLE RD
City-St-Zip: OCALA, FL 34478

Title: VSD () Delete
Name: DODSON, TIA M
Address: 3622 N E JACKSONVILLE RD
City-St-Zip: OCALA, FL 34478

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: IRA T DODSON

PTD

09/18/2006

Electronic Signature of Signing Officer or Director

Date