

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000009607

Entity Name: ACD DRAFTING SERVICE, INC.

FILED
Oct 05, 2006
Secretary of State

Current Principal Place of Business:

805 S. MAGNOLIA AVENUE
SUITE #C
OCALA, FL 34478

Current Mailing Address:

805 S. MAGNOLIA AVENUE
SUITE #C
OCALA, FL 34478

New Principal Place of Business:

805 S. MAGNOLIA AVENUE
SUITE #C
OCALA, FL 34474

New Mailing Address:

805 S. MAGNOLIA AVENUE
SUITE #C
OCALA, FL 34474

FEI Number: 57-1148360

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRANKER, ANNE
805 S. MAGNOLIA AVENUE
SUITE #C
OCALA, FL 34478 US

Name and Address of New Registered Agent:

ST. LOUIS, WILSON
805 S. MAGNOLIA AVENUE
SUITE #C
OCALA, FL 34474 US

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: WILSON ST. LOUIS

10/05/2006

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: D () Delete
Name: ST. LOUIS, WILSON
Address: 805 S. MAGNOLIA AVENUE #C
City-St-Zip: OCALA, FL 34478

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ST. LOUIS, WILSON
Address: 805 S. MAGNOLIA AVENUE #C
City-St-Zip: OCALA, FL 34474

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: WILSON ST. LOUIS

D

10/05/2006

Electronic Signature of Signing Officer or Director

Date