

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000018529

Entity Name: HAYES MASONRY CONTRACTORS, INC

FILED
Oct 14, 2009
Secretary of State

Current Principal Place of Business:

P.O. BOX 7266
TALLAHASSEE, FL 32314

New Principal Place of Business:

3025 ECHO POINTE LANE
TALLAHASSEE, FL 32310

Current Mailing Address:

P.O. BOX 7266
TALLAHASSEE, FL 32314

New Mailing Address:

3025 ECHO POINTE LANE
TALLAHASSEE, FL 32310

FEI Number: 54-2097234

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAYES, ROBERT A
3025 ECHO PT LN
TALLAHASSEE, FL 32310 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: ROBERT HAYES

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: P () Delete
Name: HAYES, ROBERT A
Address: 3025 ECHO PT LN
City-St-Zip: TALLAHASSEE, FL 32310

Title: S () Delete
Name: HAYES, JAMIE L
Address: P.O. BOX 7266
City-St-Zip: TALLAHASSEE, FL 32314

Title: V () Delete
Name: HAYES, ROBERT I
Address: PO BOX 7266
City-St-Zip: TALLAHASSEE, FL 32314

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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: ROBERT HAYES

Electronic Signature of Signing Officer or Director

PRES

10/14/2009

Date