2005 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Apr 07, 2005
Secretary of State

DOCUMENT# P03000018582

Entity Name: CLYDE JOHNSON CARPENTRY, INC.

Current Principal Place of Business:

1430 WAYMAN RD
MOORE HAVEN, FL 33471

New Principal Place of Business:

Current Mailing Address:

1430 WAYMAN RD
MOORE HAVEN, FL 33471

New Mailing Address:

FEI Number: 56-2314864 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MCGAHEE, MELANIE A
417 W SUGARLAND HWY
CLEWISTON, FL 33440 US

Name and Address of New Registered Agent:

JOHNSON, CLYDE D
1430 WAYNAM ROAD
MOORE HAVEN, FL 33471 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: CLYDE D JOHNSON 04/07/2005
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: JOHNSON, CLYDE D
Address: 1430 WAYMAN RD
City-St-Zip: MOORE HAVEN, FL 33471

Title: D ( ) Delete
Name: JOHNSON, DAITON C
Address: 1430 WAYMAN RD
City-St-Zip: MOORE HAVEN, FL 33471

Title: D (X) Delete
Name: JOHNSON, SHANAN M
Address: 1430 WAYMAN RD
City-St-Zip: MOORE HAVEN, FL 33471

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change ( ) Addition
Name: JOHNSON, CLYDE D
Address: 1430 WAYMAN RD
City-St-Zip: MOORE HAVEN, FL 33471

Title: VPT (X) Change ( ) Addition
Name: JOHNSON, SHANAN M
Address: 1430 WAYMAN RD
City-St-Zip: MOORE HAVEN, FL 33471

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 Section 119.07(3)(i), 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: CLYDE D JOHNSON P 04/07/2005
Electronic Signature of Signing Officer or Director Date