

# 2013 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000045125

Entity Name: OWEN HUTCHINSON, INC

FILED  
Feb 26, 2013  
Secretary of State

**Current Principal Place of Business:**

4519 WALNUT STREET  
BUNNELL, FL 32110

**New Principal Place of Business:**

**Current Mailing Address:**

4519 WALNUT STREET  
BUNNELL, FL 32110

**New Mailing Address:**

FEI Number: 90-0108276      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HUTCHINSON, REBECCA  
4519 WALNUT STREET  
BUNNELL, FL 32110    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: REBECCA HUTCHINSON

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: HUTCHINSON, OWEN  
Address: 4519 WALNUT STREET  
City-St-Zip: BUNNELL, FL 32110

Title: VD  
Name: HUTCHINSON, OWEN W  
Address: 4519 WALNUT STREET  
City-St-Zip: BUNNELL, FL 32110

Title: SD  
Name: ALLEN, BRYAN B  
Address: 4519 WALNUT STREET  
City-St-Zip: BUNNELL, FL 32110

I hereby 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 all other like empowered.

SIGNATURE: REBECAAHUTCHINSON

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

RA

02/26/2013

\_\_\_\_\_  
Date