

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000076949

FILED
Nov 18, 2004
Secretary of State

Entity Name: BARRINGTON WILLIAMSON CORPORATION

Current Principal Place of Business:

255 MIRACLE STRIP PARKWAY #B-5
FORT WALTON BEACH, FL 32548

New Principal Place of Business:

255 MIRACLE STRIP PARKWAY
#B-5
FORT WALTON BEACH, FL 32548

Current Mailing Address:

10859 EMERALD COAST PARKWAY
PMB 301
DESTIN, FL 32541

New Mailing Address:

255 MIRACLE STRIP PARKWAY
#B-5
DESTIN, FL 32548

FEI Number: 35-2209188

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PLEAT, DAVID B
4477 LEGENDARY DRIVE
SUITE 202
DESTIN, FL 32541 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:

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: WILLIAMSON, BRADY B
Address: 514 HUNTERS CREEK CIRCLE
City-St-Zip: MADISON, MS 39110

Title: D () Delete
Name: BARRINGTON, RHONDA
Address: PO BOX 1578
City-St-Zip: MADISON, MS 391301578

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: WILLIAMSON, BRADY B
Address: 96 PLANTATION WAY
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: D (X) Change () Addition
Name: BARRINGTON, RHONDA
Address: 244 TEQUESTA
City-St-Zip: DESTIN, FL 32541

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: BRADY B. WILLIAMSON

D

11/18/2004

Electronic Signature of Signing Officer or Director

Date