2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000119667

Title:

Name:

Address:

City-St-Zip:

Entity Name: DANNY WILL OLICHBY DDY

FILED Apr 13, 2005 Secretary of State

Entity Name: DANNY WILLOUGHBY DRYWALL, INC **Current Principal Place of Business: New Principal Place of Business:** 280 VOLUSIAN FOREST TRAILS ROAD PIERSON, FL 32180 **Current Mailing Address: New Mailing Address:** P O BOX 581 FLAGLER BEACH, FL 32136 FEI Number: 54-2132719 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WILLOUGHBY, TAMMY F 13 DEBRA LANE PALM COAST, FL 32137 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: TAMMY FOSTER-WILLOUGHBY 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition WILLOUGHBY, DANNY Name: Name: 13 DEBRA LANE Address: Address: City-St-Zip: PALM COAST, FL 32137 City-St-Zip: Title: VΡ Title: () Delete () Change () Addition Name: WILLOUGHBY, TAMMY F Name: 13 DEBRA LANE Address: Address: PALM COAST, FL 32137 City-St-Zip: City-St-Zip: Title: Title: SEC () Delete () Change () Addition WILLOUGHBY, TAMMY F Name: Name: 13 DEBRA LANE Address: Address: City-St-Zip: PALM COAST, FL 32137 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: TAMMY FOSTER-WILLOUGHBY VICP 04/13/2005

() Delete

WILLOUGHBY, TAMMY F

PALM COAST, FL 32137

13 DEBRA LANE

() Change () Addition