2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000139205

Entity Name: COWBOY'S DRYWALL, INC.

FILED Nov 03, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4625 HWY 90 1825 WAREHAM WAY PACE, FL 32571 CANTONMENT, FL 32533

Current Mailing Address: New Mailing Address:

4625 HWY 90 1825 WAREHAM WAY PACE, FL 32571 CANTONMENT, FL 32533

FEI Number: 74-3109657 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

LOLLIE, CHARLES A
4625 HWY 90

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: CHARLES A LOLLIE 11/03/2006

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 Title: (X) Change () Addition LOLLIE, CHARLES A LOLLIE, CHARLES A Name: Name: 4625 HWY 90 1825 WAREHAM WAY Address: Address: City-St-Zip: PACE, FL 32571 City-St-Zip: CANTONMENT, FL 32533 US

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 LOLLIE, ANTHONY W

 Address:
 4211 BAYCEDER LANE
 Address:
 6650 DA LISA RD

 City-St-Zip:
 PACE, FL 32571
 City-St-Zip:
 MILTON, FL 32570 US

Title: S () Delete Title: S (X) Change () Addition

 Name:
 LOLLIE, JERRY D
 Name:
 LOLLIE, JERRY D

 Address:
 273 NEL ROAD
 Address:
 276 NEAL RD

City-St-Zip: CANTONMENT, FL 32533 City-St-Zip: CANTONMENT, FL 32533 US

Title: T (X) Delete Title: () Change () Addition

 Name:
 LOLLIE, JOSEPH E
 Name:

 Address:
 283A NOWAK ROAD
 Address:

 City-St-Zip:
 CANTONMENT, FL 32533
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: CHARLES A LOLLIE P 11/03/2006