2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000143672

Entity Name: RIPPY FRAMING CO.

Address:

City-St-Zip:

12825 NW COUNTY RD 237

ALACHUA, FL 32615 US

FILED Mar 06, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 12825 NW COUNTY RD 237 ALACHUA, FL 32615 **Current Mailing Address: New Mailing Address:** 12825 NW COUNTY RD 237 ALACHUA, FL 32615 FEI Number: 05-0590633 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: RIPPY, JAMES 12825 NW COUNTY RD 237 ALACHUA, FL 32615 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: JAMES L RIPPY 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 RIPPY, JAMES L Name: Name: 12825 NW COUNTY RD 237 Address: Address: City-St-Zip: ALACHUA, FL 32615 US City-St-Zip: Title: VΡ Title: () Delete (X) Change () Addition KEARNEY, KEVIN GOOLSBY, JEFFREY S Name: Name: 19707 PEGGY RD 16807 NW 167 LANE Address: Address: ALACHUA, FL 32615 US ALACHUA, FL 32615 US City-St-Zip: City-St-Zip: Title: (X) Delete Title: () Change () Addition RIPPY, DEVEN L Name: Name: 12825 NW COUNTY RD 237 Address: Address: City-St-Zip: ALACHUA, FL 32615 US City-St-Zip: Title: (X) Delete Title: () Change () Addition RIPPY, CHARLOTTE R Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: JAMES L RIPPY P 03/06/2007