

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000148922

FILED
Sep 27, 2006
Secretary of State

Entity Name: D'FAITHFUL TRANSPORTATION, INC.

Current Principal Place of Business:

181 OXFORD ROAD
SUITE 121
CASSELEBERRY, FL 32730

New Principal Place of Business:

Current Mailing Address:

181 OXFORD ROAD
SUITE 121
CASSELEBERRY, FL 32730

New Mailing Address:

FEI Number: 90-0131257

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIXON, VONYA
181 OXFORD ROAD
SUITE 121
CASSELEBERRY, FL 32730 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: VONYA DIXON

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: PD () Delete
Name: DIXON, VONYA F
Address: 135 N LAKEWOOD CIRCLE
City-St-Zip: MAITLAND, FL 32751

Title: VPD () Delete
Name: DIXON, WALTER
Address: 135 N. LAKEWOOD CIRCLE
City-St-Zip: MAITLAND, FL 32751

Title: S () Delete
Name: THOMAS, JAMES JR
Address: 181 OXFORD ROAD
City-St-Zip: CASSELEBERRY, FL 32730

Title: D () Delete
Name: THOMAS, BETTY J
Address: 181 OXFORD ROAD
City-St-Zip: CASSELEBERRY, FL 32730

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: WALTER DIXON

VPD

09/27/2006

Electronic Signature of Signing Officer or Director

Date