2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000001150

FILED Jul 20, 2006 Secretary of State

Entity Name: SOUTHERN ESTATES DRYWALL INC.	
Current Principal Place of Business:	New Principal Place of Business:
4443 C.R. 218 UNIT 101 MIDDLEBURG, FL 32068	714 LONG DRIVE MACCLENNY, FL 32063
Current Mailing Address:	New Mailing Address:
4443 C.R. 218 UNIT 101 MIDDLEBURG, FL 32068	714 LONG DRIVE MACCCLENNY, FL 32063
FEI Number: 20-0588505 FEI Number Applied For () FEI Num	nber Not Applicable () Certificate of Status Desired ()
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
AGRA, TYANE V 575 BULLDOG TRAIL MACCLENNY, FL 32063 US	
The above named entity submits this statement for the purpose of in the State of Florida.	f changing its registered office or registered agent, or both,
SIGNATURE: TYANE V AGRA	
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: P () Delete Name: STOKES, TONYA A Address: 3226 BELLOWS CT. City-St-Zip: MIDDLEBURG, FL 32068	Title: P (X) Change () Addition Name: STOKES, TONYA A Address: 714 LONG DRIVE City-St-Zip: MACCLENNY, FL 32063
Title: () Delete Name: Address: City-St-Zip:	Title: VP () Change (X) Addition Name: GAINEY, WILLIAM R VP Address: 73 OHIO AVE City-St-Zip: MACCLENNY, FL 32063
Title: () Delete Name: Address: City-St-Zip:	Title: TRES () Change (X) Addition Name: PIPKINS, FRANK L TRES Address: 10015 NORTH LINCOLN ST City-St-Zip: GLEN ST. MARY, FL 32040

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: TONYA A STOKES PRES 07/20/2006