2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000031298

Entity Name: CLAUDE DESROSIERS, INC.

FILED Jan 11, 2006 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

118 N ST 209 HERADA STREET NEPTUNE BCH, FL 32266 ST. AUGUSTINE, FL 32080

Current Mailing Address: New Mailing Address:

118 N ST 209 HERADA STREET NEPTUNE BCH, FL 32266 ST. AUGUSTINE, FL 32080

FEI Number: 59-3783082 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:

DESROSIERS, CLAUDE

118 N ST

NEPTUNE BCH, FL 32266 US

DESROSIERS, CLAUDE

209 HERADA STREET

ST. AUGUSTINE, FL 32080 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: CLAUDE DESROSIERS 01/11/2006

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:

Title: P () Delete Title: P (X) Change () Addition Name: DESROSIERS, CLAUDE Name: DESROSIERS, CLAUDE

 Address:
 118 N ST
 Address:
 209 HERADA STREET

 City-St-Zip:
 NEPTUNE BCH, FL 32266
 City-St-Zip:
 ST. AUGUSTINE, FL 32080

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

 Name:
 CHAPIN, BETTY
 Name:

 Address:
 118 N ST
 Address:

 City-St-Zip:
 NEPTUNE BCH, FL 32266
 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: CLAUDE DESROSIERS P 01/11/2006