2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000113133

Entity Name: NEIL BUILDING & INSPECTION, INC.

FILED Apr 17, 2006 Secretary of State

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

9700 LUTHER BECK ROAD 10 PRAWN ST.

P.O. BOX 279 #15

HASTINGS, FL 32145 ST. AUGUSTINE, FL 32084

Current Mailing Address: New Mailing Address:

9700 LUTHER BECK ROAD 10 PRAWN ST. #15

P.O. BOX 279 ST. AUGUSTINE, FL 32084 HASTINGS, FL 32145

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

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

NEIL, PATRICHE A
9700 LUTHER BECK ROAD
NEIL, PATRICIA A
9560 LUTHER BECK ROAD

9700 LUTHER BECK ROAD 9560 LUTHER BECK ROAD HASTINGS, FL 32145 US HASTINGS, FL 32145 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: PAN 04/17/2006

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:

 Name:
 NEIL, CARSON S
 Name:
 NEIL, CARSON S

 Address:
 P.O. BOX 279
 Address:
 10 PRAWN ST. #15

 City-St-Zip:
 HASTINGS, FL 32145
 City-St-Zip:
 ST. AUGUSTINE, FL 32084

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

 Name:
 NEIL, PATRICHE A
 Name:
 NEIL, PATRICIA A

 Address:
 P.O. BOX 279
 Address:
 10 PRAWN ST #15

 City-St-Zip:
 HASTINGS, FL 32145
 City-St-Zip:
 ST. AUGUSTINE, FL 32145

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

 Name:
 Name:
 BETTIS, ANTHONY

 Address:
 Address:
 9700 LUTHER BECK ROAD

 City-St-Zip:
 City-St-Zip:
 ST. AUGUSTINE, FL 32145

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

 Name:
 Name:
 WHELAN, DAVID

 Address:
 Address:
 46 NORTH ST.

 City-St-Zip:
 City-St-Zip:
 ST. AUGUSTINE, FL 32080

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: PATRICHE NEIL PN 04/17/2006