

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000120565

Entity Name: SHANE ISSAC TOUCHTON, INC.

FILED
Jul 31, 2006
Secretary of State

Current Principal Place of Business:

#8 N LOCHHAVEN WAY
INVERNESS, FL 34450

New Principal Place of Business:

9790 SW 29TH CT.
OCALA, FL 34476 US

Current Mailing Address:

#8 N LOCHHAVEN WAY
INVERNESS, FL 34450

New Mailing Address:

9790 SW 29TH CT
OCALA, FL 34476 US

FEI Number: 20-1681051

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TOUCHTON, SHANE
#8 N LOCHHAVEN WAY
INVERNESS, FL 34450 US

Name and Address of New Registered Agent:

TOUCHTON, SHANE I MR.
9790 SW 29TH CT.
OCALA, FL 34476 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: SHANE I. TOUCHTON

07/31/2006

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
Name: TOUCHTON, SHANE
Address: #8 N LOCHHAVEN WAY
City-St-Zip: INVERNESS, FL 34450

Title: ST () Delete
Name: GOODWIN, SHILAH
Address: #8 N LOCHHAVEN WAY
City-St-Zip: INVERNESS, FL 34450

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: TOUCHTON, SHANE I MR.
Address: 9790 SW 29TH CT.
City-St-Zip: OCALA, FL 34476 US

Title: ST (X) Change () Addition
Name: TOUCHTON, CRYSTAL A MRS.
Address: 9790 SW 29TH CT.
City-St-Zip: OCALA, FL 34476 US

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: CRYSTAL A. TOUCHTON

ST

07/31/2006

Electronic Signature of Signing Officer or Director

Date