## 2006 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P04000138858

Entity Name: T.O.P. CONSTRUCTION, INC.

3617 TIGER POINT BLVD

GULF BREEZE, FL 32563 US

Address:

City-St-Zip:

FILED Oct 10, 2006 Secretary of State

Current P	Principal Place of	Business:	New Principal Place	New Principal Place of Business:	
	F BREEZE PARK	WAY			
UNIT A GULF BRI	EEZE, FL 32563	US			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
3617 TIGER POINT BLVD GULF BREEZE, FL 32563 US		2550 GULF BREEZE PARKWAY UNIT A GULF BREEZE, FL 32563 US			
FEI Number	: 20-1710819 F	El Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
	S, PAUL E ER POINT BLVD EEZE, FL 32563	US			
	e named entity sub e of Florida.	mits this statement for the	purpose of changing its registere	d office or registered agent, or both,	
SIGNATU	RE: PAUL E PRII	NTISS			
	Electronic S	Signature of Registered Ag	ent	Date	
		(b), F.S., the corporation did nous function ( ).	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	P () Del PRINTISS, PAUL E 3617 TIGER POINT GULF BREEZE, FL	BLVD	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VP () Del ELENZ, KEITH W 201 EMERALD AVE PENSACOLA, FL 3	<b>.</b>	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VP ( ) Del SCHREY, DAMIAN 1857 ATWOOD DR PENSACOLA, FL 3	J IVE, J-99	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	S () Del PRINTISS, DONNA		Title: Name:	( ) Change ( ) Addition	

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.

Address:

City-St-Zip:

SIGNATURE: PAUL E PRINTISS P 10/10/2006