

# **2009 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P04000143977

**FILED**  
**Nov 23, 2009**  
**Secretary of State**

**Entity Name:** ACCURATE PAINTING OF NORTHWEST FLORIDA INC.

**Current Principal Place of Business:**

6604 POSSUM RIDGE  
CRESTVIEW, FL 32539 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 341  
CRESTVIEW, FL 32536 US

**New Mailing Address:**

P.O. BOX 1324  
SANTA ROSA BEACH, FL 32459 US

**FEI Number:** 73-1721022

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WEBSTER, JAMES T  
6604 POSSUM RIDGE  
CRESTVIEW, FL 32539 US

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

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: JAMES T. WEBSTER

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: PVT ( ) Delete  
Name: WEBSTER, JAMES T  
Address: 6604 POSSUM RIDGE  
City-St-Zip: CRESTVIEW, FL 32539 US

Title: S ( ) Delete  
Name: WEBSTER, MARNIE A  
Address: 6604 POSSUM RIDGE  
City-St-Zip: CRESTVIEW, FL 32539 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PST (X) Change ( ) Addition  
Name: WEBSTER, JAMES T  
Address: 6604 POSSUM RIDGE  
City-St-Zip: CRESTVIEW, FL 32539 US

Title: V (X) Change ( ) Addition  
Name: WEBSTER, MARNIE A  
Address: 6604 POSSUM RIDGE  
City-St-Zip: CRESTVIEW, FL 32539 US

I hereby certify that the information supplied with this filing does not qualify 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: JAMES T. WEBSTER

P

11/23/2009

Electronic Signature of Signing Officer or Director

Date