

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000168999

FILED  
Oct 30, 2006  
Secretary of State

Entity Name: WILLIAM ANDREW & SONS,INC.

**Current Principal Place of Business:**

3316 196TH TERRACE  
WELLBORN, FL 32094 US

**New Principal Place of Business:**

**Current Mailing Address:**

2749 NORTH POINCIANA BLVD  
APT. 18  
KISSIMMEE, FL 34746 US

**New Mailing Address:**

3316-196 TERRACE  
WELLBORN, FL 32094 US

FEI Number: 20-2187005

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ANDREW, WILLIAM F  
3316 196TH TERRACE  
WELLBORN, FL 32094 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: WILLIAM F ANDREW

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: ANDREW, WILLIAM F  
Address: 3316 196TH TERRACE  
City-St-Zip: WELLBORN, FL 32094 US

Title: VP ( ) Delete  
Name: JASON, ADAMS K VP  
Address: 3316 196TH TERRACE  
City-St-Zip: WELLBORN, FL 32094 US

Title: SEC ( ) Delete  
Name: BILLY, ANDREW D SEC  
Address: 3316 196TH TERRACE  
City-St-Zip: WELLBORN, FL 32094 US

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: WILLIAM F ANDREW

Electronic Signature of Signing Officer or Director

P

10/30/2006

Date