

# **2010 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P05000005440

**FILED**  
**May 17, 2010**  
**Secretary of State**

**Entity Name:** DAVID WILLIAMS PAINTING OF SOUTH FLORIDA, INC.

**Current Principal Place of Business:**

1856 SW HICKOCK TERRACE  
PORT ST LUCIE, FL 34953

**New Principal Place of Business:**

**Current Mailing Address:**

1856 SW HICKOCK TERRACE  
PORT ST LUCIE, FL 34953

**New Mailing Address:**

1 RICKS DRIVE LOT E  
LAKE WORTH, FL 33463

**FEI Number:** 86-1157694

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WILLIAMS, DAVID  
1856 SW HICKOCK TERRACE  
PORT ST LUCIE, FL 34953 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:** DAVID WILLIAMS

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: DP  
Name: WILLIAMS, DAVID  
Address: 1856 SW HICKOCK TERRACE  
City-St-Zip: PORT ST LUCIE, FL 34953

Title: DV  
Name: WILLIAMS, LORI  
Address: 1856 SW HICKOCK TERRACE  
City-St-Zip: PORT ST LUCIE, FL 34953

I hereby 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 all other like empowered.

**SIGNATURE:** DAVID WILLIAMS

DP

05/17/2010

Electronic Signature of Signing Officer or Director

Date