2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000017100

Entity Name: FORREST ENTERPRISES OF DESTIN, INC.

FILED Nov 04, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

415 FLAMINGO DR DESTIN, FL 32541

Current Mailing Address: New Mailing Address:

415 FLAMINGO DR POBOX6

COLUMBIA, MS 39429 DESTIN, FL 32541

FEI Number: 05-0536085 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BARTH, JAMES C 30 SOUTH SHORE DRIVE DESTIN, FL 32550

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 C. BARTH

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

FORREST, JOHN W FORREST, JOHN W Name: Name:

P. O. BOX 35 POBOX6 Address: Address: City-St-Zip: DESTIN, FL 325400035 City-St-Zip: COLUMBIA, MS 39429

VTS Title: VTS

Title: () Delete (X) Change () Addition Name: FORREST, AMANDA Name: FORREST, AMANDA

415 FLAMINGO DR 1176 COLUMBIA PURVIS ROAD Address: Address:

COLUMBIA, MS 39429 City-St-Zip: DESTIN, FL 32541 City-St-Zip:

Title: (X) Change () Addition Title: DP () Delete DP

FORREST, JOHN W Name: FORREST, JOHN W Name:

415 FLAMINGO DR 1176 COLUMBIA PURVIS ROAD Address: Address:

City-St-Zip: DESTIN, FL 32541 City-St-Zip: COLUMBIA, MS 39429

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: AMANDA P. FORREST **VTS** 11/04/2009