2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000037100

BERRY, PHILLIP JR

ALFORD, FL 32420

1822 PARK AVE

Name:

Address:

City-St-Zip:

Entity Name: WAYNE BERRY CONSTRUCTION CO., INC.

FILED Dec 05, 2006 Secretary of State

Littly Name: WATNE BERRY CONSTRUCTION CO., INC.					
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
1290 FALL CHIPLEY,	ING WATERS FL 32428	RD			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
1290 FALL CHIPLEY,	ING WATERS FL 32428	RD			
FEI Number:	20-2499047	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	Current Registered Agent:	Name and Address	of New Registered Agent:	
BERRY, WAYNE P SR 1290 FALLING WATERS RD CHIPLEY, FL 32428 US					
The above in the State		submits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,	
SIGNATUR	RE: WAYNE	BERRY			
	Electror	nic Signature of Registered Age	ent	Date	
		3(2)(b), F.S., the corporation did no g Trust Fund Contribution ().	t receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () BERRY, WAYN 1290 FALLING CHIPLEY, FL (WATERS RD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () BERRY, CHRIS 2058 HWY 231 COTTONDALE,	С	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () BERRY, CHAR 1284 STATE PA CHIPLEY, FL	ARK RD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	VP (. Delete	Title:	() 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.

Name:

Address:

City-St-Zip:

SIGNATURE: WAYNE BERRY PRES 12/05/2006