## 2009 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P05000037663

Entity Name: SUMMER SHELTER CONSTRUCTION, INC.

FILED Feb 04, 2009 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

WATSON, CHRISTOPHER H

27 PITTS BAYSHORE DRIVE

FREEPORT, FL 32439

(X) Change ( ) Addition

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

313 E POINT WASHINGTON RD SANTA ROSA BEACH, FL 32459

Current Mailing Address: New Mailing Address:

313 E POINT WASHINGTON RD POST OFFICE BOX 611717 SANTA ROSA BEACH, FL 32459 POSEMARY BEACH, FL 32461

FEI Number: 20-2528225 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

WATSON, FRANKLIN H 5365 E CO HWY 30-A SUITE 105 SEAGROVE BEACH, FL 32459 US

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: FRANKLIN H. WATSON

Electronic Signature of Registered Agent Date

Title:

Name:

Address:

City-St-Zip:

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:
 PT () Delete

 Name:
 WATSON, CHRISTOPHER H

 Address:
 313 E POINT WASHINGTON RD

 City-St-Zip:
 SANTA ROSA BEACH, FL 32459

Title: VS ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 WATSON, LYNN H
 Name:

 Address:
 313 E POINT WASHINGTON RD
 Address:

 City-St-Zip:
 SANTA ROSA BEACH, FL 32459
 City-St-Zip:

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: CHRISTOPHER H WATSON PT 02/04/2009