

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000042557

FILED
Oct 16, 2006
Secretary of State

Entity Name: PAYTON CONSTRUCTION, INC.

Current Principal Place of Business:

221 HIBISCUS AVE.
MASCOTTE, FL 34753

New Principal Place of Business:

227 HIBISCUS AVE.
MASCOTTE, FL 34753

Current Mailing Address:

P O BOX 263
MASCOTTE, FL 34753

New Mailing Address:

FEI Number: 20-2562501

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FREEMAN, TONY SHANE
221 HIBISCUS AVE.
MASCOTTE, FL 34753 US

Name and Address of New Registered Agent:

FREEMAN, TONY SHANE
227 HIBISCUS AVE.
MASCOTTE, FL 34753 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: TONY SHANE FREEMAN

10/16/2006

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: PD () Delete
Name: FREEMAN, CECIL E
Address: P O BOX 263
City-St-Zip: MASCOTTE, FL 34753

Title: SD () Delete
Name: FREEMAN, TONY SHANE
Address: P O BOX 263
City-St-Zip: MASCOTTE, FL 34753

Title: T () Delete
Name: FREEMAN, JANET
Address: P O BOX 263
City-St-Zip: MASCOTTE, FL 34753

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: TONY SHANE FREEMAN

SD

10/16/2006

Electronic Signature of Signing Officer or Director

Date