2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000075005

Entity Name: DEAN WILSON ROOFING, INC.

FILED Jul 22, 2008 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

450 TREASURE ISLAND CAUSEWAY 2426 CENTRAL AVE

#308 ST PETERSBURG, FL 33712 US

TREASURE ISLAND, FL 33706 US

Current Mailing Address: New Mailing Address:

450 TREASURE ISLAND CAUSEWAY 2426 CENTRAL AVE

#308 ST PETERSBURG, FL 33712 US TREASURE ISLAND, FL 33706 US

FEI Number: 20-2916167 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:

SCHARN, DEAN R
450 TREASURE ISLAND CAUSEWAY
#308

SCHARN, DEAN R
2426 CENTRAL AVE
ST PETERSBURG, FL 33712 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: DEAN R SCHARN 07/22/2008

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:

TREASURE ISLAND, FL 33706 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name: SCHARN, DEAN R
Address: 450 TREASURE ISLAND CAUSEWAY, NO. 308
Name: SCHARN, DEAN R
Address: 2426 CENTRAL AVE

City-St-Zip: TREASURE ISLAND, FL 33706 US City-St-Zip: ST PETERSBURG, FL 33712 US

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

Name: Name: BARNETT, BYRON L
Address: Address: 3738 53RD AVE N

City-St-Zip: City-St-Zip: ST PETERSBURG, FL 33714 US

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: DEAN R SCHARN PTS 07/22/2008