

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000089143

FILED
Jan 23, 2009
Secretary of State

Entity Name: MARTIN & WILSON CORPORATION

Current Principal Place of Business:

12377 JULIA STREET
SEMINOLE, FL 33772 US

New Principal Place of Business:

12418 CHICKASAW TRAIL
LARGO, FL 33774 US

Current Mailing Address:

12377 JULIA STREET
SEMINOLE, FL 33772 US

New Mailing Address:

12418 CHICKASAW TRAIL
LARGO, FL 33774 US

FEI Number: 20-3047362

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SIMONE, STEPHEN CPA
6439 CENTRAL AVENUE
SAINT PETERSBURG, FL 337108411 US

Name and Address of New Registered Agent:

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: STEPHEN SIMONE

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: P () Delete
Name: WILSON, IAN L
Address: 12377 JULIA STREET
City-St-Zip: SEMINOLE, FL 33772 US

Title: ST () Delete
Name: MARTIN, BRAD L
Address: 12377 JULIA STREET
City-St-Zip: SEMINOLE, FL 33772 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WILSON, IAN L
Address: 12418 CHICKASAW TRAIL
City-St-Zip: LARGO, FL 33774 US

Title: ST (X) Change () Addition
Name: MARTIN, BRAD L
Address: 12418 CHICKASAW TRAIL
City-St-Zip: LARGO, FL 33774 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: IAN WILSON

MR

01/23/2009

Electronic Signature of Signing Officer or Director

Date