2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000120808

Entity Name: DAVID MCPHERSON CONSTRUCTION, INC.

FILED Nov 04, 2009 Secretary of State

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

6801 KENWOOD PLACE 9037 COUNTY FARM RD. SEBRING, FL 33876 LONG BEACH, MS 39560

Current Mailing Address: New Mailing Address:

6801 KENWOOD PLACE 9037 COUNTY FARM RD. SEBRING, FL 33876 LONG BEACH, MS 39560

FEI Number: 20-3437003 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:

MCPHERSON, DAVID MCPHERSON, DAVID A SR. 6801 KENWOOD PLACE 9037 COUNTY FARM RD. SEBRING, FL 33876 US LONG BEACH, FL 39560 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: NANCY MCPHERSON 11/04/2009

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition MCPHERSON, DAVID MCPHERSON, DAVID A SR. Name: Name: 6801 KENWOOD PLACE 9037 COUNTY FARM RD. Address: Address: City-St-Zip: SEBRING, FL 33876 City-St-Zip: LONG BEACH, MS 39560

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

 Name:
 MCPHERSON, NANCY
 Name:
 MCPHERSON, NANCY L

 Address:
 6801 KENWOOD PLACE
 Address:
 9037 COUNTY FARM RD.

 City-St-Zip:
 SEBRING, FL 33876
 City-St-Zip:
 LONG BEACH, MS 39560

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: NANCY L. MCPHERSON SECT 11/04/2009