2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000143532

Entity Name: SHERR, INC.

FILED Nov 03, 2008 Secretary of State

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

36750 US HWY 19 N, INNISBROOK RESORT AUGUSTA LODGE, SUITE # 2014 PALM HARBOR, FL 34684

Current Mailing Address: New Mailing Address:

36750 US HWY 19 N, INNISBROOK RESORT AUGUSTA LODGE, SUITE # 2014 PALM HARBOR, FL 34684

FEI Number: 03-0578503 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:

GODDARD, SHARON L GODDARD, SHARON L RN
36750 US HWY 19 N, INNISBROOK RESORT
AUGUSTA LODGE, SUITE #2104
PALM HARBOR, FL 34684 US
GODDARD, SHARON L RN
36750 US HWY 19 N, INNISBROOK RESORT
AUGUSTA LODGE, SUITE #2104
PALM HARBOR, FL 34684 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: SHARON L GODDARD 11/03/2008

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: () Change () Addition

Name: GODDARD, SHARON L Name:

 Address:
 36750 US HWY 19 N, AUGUSTA LDG, STE. #2014
 Address:

 City-St-Zip:
 PALM HARBOR, FL 34684 US
 City-St-Zip:

Title: VP () Delete Title: () Change () Addition Name: GODDARD. SHARON L Name:

Address: 36750 US HWY 19 N, AUGUSTA LDG., STE. #201 Address: City-St-Zip: PALM HARBOR, FL 34684 US 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: SHARON L GODDARD P 11/03/2008