

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000006570

FILED
Jan 22, 2008
Secretary of State

Entity Name: TRADEWINDS EXCAVATION CO., INC.

Current Principal Place of Business:

3900 OLDFIELD CROSSING DRIVE APT 605
JACKSONVILLE, FL 32223

New Principal Place of Business:

5001 TOTEM COURT
JACKSONVILLE, FL 32259

Current Mailing Address:

3900 OLDFIELD CROSSING DRIVE APT 605
JACKSONVILLE, FL 32223

New Mailing Address:

2133 JOCKEY HOLLOW DRIVE NW
KENNESAW, GA 30152

FEI Number: 04-2949265

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALWARDT, MADISON JR
3900 OLDFIELD CROSSING DRIVE APT 605
JACKSONVILLE, FL 32223 US

Name and Address of New Registered Agent:

ALWARDT, MADISON E JR
5001 TOTEM COURT
JACKSONVILLE, FL 32259 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: MADISON E. ALWARDT, JR.

01/22/2008

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:

Title: DP () Delete
Name: ALWARDT, MADISON JR
Address: 3900 OLDFIELD CROSSING DRIVE APT 605
City-St-Zip: JACKSONVILLE, FL 32223

Title: DT () Delete
Name: ALWARDT, JASON
Address: 2133 JOCKEY HOLLOW DR NW IVE APT 605
City-St-Zip: KENNESAW, GA 30152

Title: D () Delete
Name: ALWART, RYAN
Address: 4083 SUNBEAM RD APT 1901
City-St-Zip: JACKSONVILLE, FL 32257

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ALWARDT, MADISON E JR
Address: 5001 TOTEM COURT
City-St-Zip: JACKSONVILLE, FL 32259

Title: TD (X) Change () Addition
Name: ALWARDT, JASON M
Address: 2133 JOCKEY HOLLOW DRIVE NW
City-St-Zip: KENNESAW, GA 30152

Title: SCD (X) Change () Addition
Name: ALWART, JASON M
Address: 2133 JOCKEY HOLLOW DRIVE NW
City-St-Zip: KENNESAW, GA 30152

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: JASON M. ALWARDT

SCD

01/22/2008

Electronic Signature of Signing Officer or Director

Date