

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000060413

Entity Name: C&M GP, INC.

FILED
Oct 01, 2008
Secretary of State

Current Principal Place of Business:

6877 PHILIPS INDUSTRIAL BLVD
JACKSONVILLE, FL 32256

New Principal Place of Business:

11620 LOIS CROSS DRIVE
JACKSONVILLE, FL 32258

Current Mailing Address:

6877 PHILIPS INDUSTRIAL BLVD
JACKSONVILLE, FL 32256

New Mailing Address:

11620 LOIS CROSS DRIVE
JACKSONVILLE, FL 32258

FEI Number: 20-4984017

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HINCKLEY, ROBERT W
501 RIVERSIDE AVENUE
SUITE 800
JACKSONVILLE, FL 32202 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: ROBERT W. HINCKLEY

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: D () Delete
Name: BOATWRIGHT, MAYLON D
Address: 6877 PHILIPS INDUSTRIAL BLVD
City-St-Zip: JACKSONVILLE, FL 32256

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
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: MAYLON D. BOATWRIGHT

D

10/01/2008

Electronic Signature of Signing Officer or Director

Date