## 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000113593

**Entity Name:** ECONOMICAL CONSTRUCTION INC

**FILED** Feb 21, 2008 Secretary of State

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

2867 NE 7 ST APT G 11410 SE 59 TERRACE OCALA, FL 34470 BELLEVIEW, FL 34420

**Current Mailing Address: New Mailing Address:** 

2867 NE 7 ST APT G 11410 SE 59 TERRACE OCALA, FL 34470 BELLEVIEW, FL 34420

FEI Number: 20-5484725 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:

CHARLEMAGNE, MARCELLUS CHARLEMAGNE, MARCELLUS 2867 NE 7 ST APT G 11410 SE 59 TERRACE OCALA, FL 34470 US BELLEVIEW, FL 34420

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: MARCELLUS CHARLEMAGNE 02/21/2008

> 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 ( ). ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

## **OFFICERS AND DIRECTORS:**

Name: Address:

City-St-Zip:

Title: ( ) Delete (X) Change ( ) Addition CHARLEMAGNE, MARCELLUS CHARLEMAGNE, MARCELLUS Name: Name:

2867 NE 7 ST APT G Address: 11410 SE 59 TERRACE Address: City-St-Zip: OCALA, FL 34470 City-St-Zip: BELLEVIEW, FL 34420

Title: VΡ Title: (X) Change ( ) Addition () Delete CHARLEMAGNE, ALBERT Name: Name: CHARLEMAGNE, DELVA

2867 NE 7 ST APT G 11410 SE 59 TERRACE Address: Address: OCALA, FL 34470 BELLEVIEW, FL 34420 City-St-Zip: City-St-Zip:

Title: Title: () Delete (X) Change ( ) Addition ARTHUR, ODINGA CHARLEMAGNE, FELIX R Name: Name:

36 JUNIPER PASS APT #3 3 BAHIA PASS PLACE Address: Address: City-St-Zip: OCALA, FL 34480 City-St-Zip: OCALA, FL 34472

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

CHARLEMAGNE, DELVA Name: 2867 NE 7 ST APT G Address: OCALA, FL 34470 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.

Ρ SIGNATURE: MARCELLUS CHARLEMAGNE 02/21/2008