2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P07000056921

Jul 22, 2009 Secretary of State

FILED

Entity Name: FUNKEY CONTRACTING AND RENOVATIONS INC

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

92 W 3RD STREET

ATLANTIC BEACH, FL 32233 LIS

Current Mailing Address: New Mailing Address:

92 W 3RD STREET

ATLANTIC BEACH, FL 32233 US

FEI Number: 26-0147733 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ALL FLORIDA FIRM, INC 813 DELTONA BLVD, STE A BOX 1400514 DELTONA, FL 32725 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:

Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete

FUNKEY, DAVID M Name: 92 W 3RD STREET Address:

City-St-Zip: ATLANTIC BEACH, FL 32233 US

Title: () Delete

COAN, JOHN Name:

444 LOWER EIGTH AVE. S. Address:

JACKSONVILLE BEACH, FL 32250 City-St-Zip:

Title: () Delete PATTERSON, STEVE Name: 8787 SOUTHSIDE BLVD Address: City-St-Zip: JACKSONVILLE, FL 32256 Title: (X) Change () Addition

FUNKEY, DAVID M Name: 219 SOLANO CAY CIRCLE Address: City-St-Zip: PONTE VEDRA, FL 32082 US

Title: VΡ (X) Change () Addition

COAN, JOHN Name:

444 LOWER EIGTH AVE. S. Address:

JACKSONVILLE BEACH, FL 32250 US City-St-Zip:

Title: (X) Change () Addition FUNKEY, JULIE L SECRETA Name: 219 SOLANO CAY CIRCLE Address: City-St-Zip: PONTE VEDRA, FL 32082 US

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: DAVID M. FUNKEY 07/22/2009