2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000058557

Entity Name: SWAILES PAINTING CORPORATION

FILED Oct 31, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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306 LEEWARD ISLE 140 ISLAND WAY CLEARWATER, FL 33767 SUITE 235

CLEARWATER, FL 33767

Current Mailing Address: New Mailing Address:

306 LEEWARD ISLE 140 ISLAND WAY

CLEARWATER, FL 33767 SUITE 235

CLEARWATER, FL 33767

FEI Number: 26-0184825 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:

SWAILES, GARY S
306 LEEWARD ISLE
CLEARWATER, FL 33767 US
SWAILES, GARY S
140 ISLAND WAY
SUITE 235

CLEARWATER, FL 33767 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: GARY S. SWAILES 10/31/2008

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

 Name:
 SWAILES, GARY S
 Name:
 SWAILES, GARY S

 Address:
 306 LEEWARD ISLE
 Address:
 140 ISLAND WAY, SUITE 235

City-St-Zip: CLEARWATER, FL 33767 City-St-Zip: CLEARWATER, FL 33767

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

Name: Name: ELLIS, VIRGINIA

 Address:
 Address:
 140 ISLAND WAY, SUITE 235

 City-St-Zip:
 City-St-Zip:
 CLEARWATER, FL 33767

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

 Name:
 Name:
 MCCOY, MARK R

 Address:
 Address:
 4955 1ST AVE NORTH

 City-St-Zip:
 City-St-Zip:
 ST. PETERSBURG, FL 33701

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: GARY S. SWAILES D 10/31/2008