2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000068316

City-St-Zip:

JACKSONVILLE, FL 32210

Entity Name: THORTON'S ONE TIME STUCCO. INC

FILED Jan 16, 2009 Secretary of State

Littly Nai	ille. THORTC	DIVISIONE TIME STOCCO, INC			
Current P	rincipal Place	e of Business:	New Principal Place	New Principal Place of Business:	
10152 RISING MIST LANE JACKSONVILLE, FL 32221			4623 AVAMYA CT JACKSONVILLE, FL	4623 AVAMYA CT JACKSONVILLE, FL 32210	
Current M	lailing Addre	ss:	New Mailing Addres	New Mailing Address:	
10152 RISING MIST LANE JACKSONVILLE, FL 32221			4623 AVAMYA CT JACKSONVILLE, FL	4623 AVAMYA CT JACKSONVILLE, FL 32210	
FEI Number:	: 68-0652495	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
3721 HEN	S, G. EVERETT DRICKS AVEI WILLE, FL 32:	NUE			
The above in the State	named entity e of Florida.	submits this statement for the p	ourpose of changing its registere	d office or registered agent, or both,	
SIGNATUR	RE: GEVERE	ETT WILLIAMS			
	Electro	nic Signature of Registered Age	ent	Date	
		3(2)(b), F.S., the corporation did no g Trust Fund Contribution ().	at receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P/D (THORNTON, M 10152 RISING JACKSONVILL	MIST LANE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP (THORNTON, G 1979 MCGIRT: JACKSONVILL	S POINT BLVD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	HOWARD, HE) Delete NRY W \ COURT, NORTH	Title: Name: Address:	() Change () Addition	

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.

City-St-Zip:

SIGNATURE: MARION THORNTON P 01/16/2009