

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P08000037137

**FILED**  
**Oct 14, 2009**  
**Secretary of State**

**Entity Name:** BEACON CONSTRUCTION GROUP, INC.

**Current Principal Place of Business:**

1830 POINT WEST WAY  
VERO BEACH, FL 32966

**New Principal Place of Business:**

255 EVERNIA STREET  
#1311  
WEST PALM BEACH, FL 33401

**Current Mailing Address:**

1830 POINT WEST WAY  
VERO BEACH, FL 32966

**New Mailing Address:**

255 EVERNIA STREET  
#1311  
WEST PALM BEACH, FL 33401

**FEI Number:** 74-3257251

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

CONVILLE, MICHAEL T.  
1830 POINT WEST WAY  
VERO BEACH, FL 32966 US

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

CONVILLE, MICHAEL T.  
255 EVERNIA STREET  
#1311  
WEST PALM BEACH, FL 33401 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:** MICHAEL T CONVILLE

10/14/2009

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** DPS ( ) Delete  
**Name:** CONVILLE, MICHAEL T.  
**Address:** 1830 POINT WEST WAY  
**City-St-Zip:** VERO BEACH, FL 32966

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

**Title:** DPS (X) Change ( ) Addition  
**Name:** CONVILLE, MICHAEL T.  
**Address:** 255 EVERNIA STREET N#1311  
**City-St-Zip:** WEST PALM BEACH, FL 33401

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:** MICHAEL T CONVILLE

DPS

10/14/2009

Electronic Signature of Signing Officer or Director

Date