

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P08000040638

FILED  
Dec 14, 2009  
Secretary of State

Entity Name: BARR-NONE PAINTING SERVICE, INC.

## Current Principal Place of Business:

417 ALTARA DR  
ST .AUGUSTINE, FL 32086

## New Principal Place of Business:

2660 ISABELLA AVENUE  
ST. AUGUSTINE, FL 32086 US

## Current Mailing Address:

417 ALTARA DR  
ST .AUGUSTINE, FL 32086

## New Mailing Address:

2660 ISABELLA AVENUE  
ST. AUGUSTINE, FL 32086 US

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

AMERICAN SAFETY COUNCIL, INC.  
5125 ADANSON ST.  
SUITE 500  
ORLANDO, FL 32804 US

## Name and Address of New Registered Agent:

BARR-NONE PAINTING SERVICES, INC..  
2660 ISABELLA AVENUE  
ST. AUGUSTINE, FL 32086 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: ANTHONY BARR

12/14/2009

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:

Title: PVST ( ) Delete  
Name: BARR, ANTHONY  
Address: 417 ALTARA DR  
City-St-Zip: ST .AUGUSTINE, FL 32086

Title: D ( ) Delete  
Name: BARR, ANTHONY  
Address: 417 ALTARA DR  
City-St-Zip: ST .AUGUSTINE, FL 32086

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVST (X) Change ( ) Addition  
Name: BARR, ANTHONY  
Address: 2660 ISABELLA AVENUE  
City-St-Zip: ST .AUGUSTINE, FL 32086 US

Title: D (X) Change ( ) Addition  
Name: BARR, ANTHONY  
Address: 2660 ISABELLA AVENUE  
City-St-Zip: ST .AUGUSTINE, FL 32086 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.

SIGNATURE: ANTHONY BARR

PVST

12/14/2009

Electronic Signature of Signing Officer or Director

Date