

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P09000019602

**FILED**  
**Apr 18, 2011**  
**Secretary of State**

**Entity Name:** CANNON'S HOME IMPROVEMENT INC.

**Current Principal Place of Business:**

10985 ROYAL PALM BLVD.  
CORAL SPRINGS, FL 33065

**New Principal Place of Business:**

1606 SE TIFFANY CLUB PLACE  
APT#1606  
PORT SAINT LUCIE, FL 34985

**Current Mailing Address:**

10985 ROYAL PALM BLVD.  
CORAL SPRINGS, FL 33065

**New Mailing Address:**

1606 SE TIFFANY CLUB PLACE  
APT#1606  
PORT SAINT LUCIE, FL 34985

**FEI Number:** 80-0363105

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LINDSEY, ARTHUR  
3009 NW 2ND STREET  
POMPANO BEACH, FL 33069 US

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

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: ARTHUR LINDSEY

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: CANNON, BILLY  
Address: SE TIFFANY CLUB PLACE  
City-St-Zip: PORT SAINT LUCIE, FL 34985

Title: V  
Name: CANNON, ROCHELLE  
Address: SE TIFFANY CLUB PLACE  
City-St-Zip: PORT SAINT LUCIE, FL 34985

Title: S  
Name: CANNON, ROCHELLE  
Address: SE TIFFANY CLUB PLACE  
City-St-Zip: PORT SAINT LUCIE, FL 34985

I hereby 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 all other like empowered.

SIGNATURE: BILLY CANNON

P

04/18/2011

Electronic Signature of Signing Officer or Director

Date