

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P94000026977

Entity Name: E. JOHNSON CARPENTRY, INC.

FILED
Oct 14, 2009
Secretary of State

Current Principal Place of Business:

2607 HANSON STREET
#5
FORT MYERS, FL 33901 US

New Principal Place of Business:

Current Mailing Address:

2607 HANSON STREET
#5
FORT MYERS, FL 33901 US

New Mailing Address:

FEI Number: 65-0473928 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSON, ELMER SR.
3033 THOMAS STREET
FORT MYERS, FL 33916 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: ELMER JOHNSON SR.

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: PD () Delete
Name: JOHNSON, ELMER SR.
Address: 3033 THOMAS STREET
City-St-Zip: FORT MYERS, FL 33916

Title: P () Delete
Name: JOHNSON, ELMER
Address: 3033 THOMAS ST
City-St-Zip: FT MYERS, FL 33916

Title: VP () Delete
Name: REPRESS, JENNIFER
Address: 3033 THOMAS STREET
City-St-Zip: FORT MYERS, FL 33916

Title: SEC () Delete
Name: JOHNSON, JUSTIN
Address: 3033 THOMAS STREET
City-St-Zip: FORT MYERS, FL 33916

Title: T () Delete
Name: JOHNSON, DWAYNE
Address: 3033 THOMAS STREET
City-St-Zip: FORT MYERS, FL 33916

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ELMER JOHNSON SR.

PD

10/14/2009

Electronic Signature of Signing Officer or Director

Date