2011 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Nov 29, 2011
Secretary of State

DOCUMENT# P94000046682

Entity Name: W. L. ROBERTS, INC.

Current Principal Place of Business:

2709 CRAWFORDVILLE HWY
CRAWFORDVILLE, FL 32327 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 730
CRAWFORDVILLE, FL 32326 US

New Mailing Address:

FEI Number: 59-3251167 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROBERTS, WALTER L
2721 COASTAL HWY.
CRAWFORDVILLE, FL 32327 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: WALTER L. ROBERTS

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D
Name: ROBERTS, WALTER L
Address: 2721 COASTAL HWY.
City-St-Zip: CRAWFORDVILLE, FL 32327 US

Title: D
Name: ROBERTS, BEVERLY T
Address: P.O. BOX 730
City-St-Zip: CRAWFORDVILLE, FL 32326 US

Title: D
Name: ROBERTS-ALLEN, LEANNE
Address: P.O. BOX 1636
City-St-Zip: CRAWFORDVILLE, FL 32326 US

Title: D
Name: ROBERTS, KEVIN
Address: P.O. BOX 730
City-St-Zip: CRAWFORDVILLE, FL 32326 US

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: WALTER L. ROBERTS PRES 11/29/2011

Electronic Signature of Signing Officer or Director — Date