## 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P94000066653

Entity Name: D. W. HIRST & ASSOCIATES, INC.

**FILED** Sep 25, 2007 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Busi	ness: New	Principal Place of Bus	siness:
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12101 C.R. 484 12049 C.R. 484

BELLEVIEW, FL 34420 US BELLEVIEW, FL 34420 US

**Current Mailing Address: New Mailing Address:** 

P.O. BOX 1359 P.O. BOX 3159

BELLEVIEW, FL 34421 US BELLEVIEW, FL 34421 US

FEI Number: 59-3310065 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

**BRENDA JEPSON WILLIAMS** HIRST, DAVID W SECRETA 12530 SE 36 TH AVE 6683 CRILL AVENUE BELLEVIEW, FL 34420 PALATKA, FL 32177 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: DAVID W. HIRST 09/25/2007

> 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:

() Delete Title: (X) Change ( ) Addition

HIRST, JAN HIRST, JAN Name: Name: 12530 C HWY 462 Address: 12530 C HWY 467 Address: City-St-Zip: BELLEVIEW, FL 34420 City-St-Zip: BELLEVIEW, FL 34420

( ) Delete Title: Title: (X) Change ( ) Addition

Name: HIRST, DAVID Name: HIRST, DAVID 12101 C.R 484 Address: 12530 C HWY 467 Address: BELLEVIEW, FL 34420 BELLEVIEW, FL 34420 City-St-Zip: 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: JANET T. HIRST **PRES** 09/25/2007