

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P94000093181

FILED
Oct 24, 2008
Secretary of State

Entity Name: BUCHANON AND SON PLASTERING, INC.

Current Principal Place of Business:

2020 OLD DIXIE HWY STE #8
VERO BEACH, FL 32962

New Principal Place of Business:

Current Mailing Address:

2020 OLD DIXIE HWY STE #8
VERO BEACH, FL 32962

New Mailing Address:

FEI Number: 65-0551784

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUCHANON, GREGG
8102 BAYARD ROAD
FORT PIERCE, FL 34951 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: GREGGORY A BUCHANON

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: P () Delete
Name: BUCHANON, GREGGORY A
Address: 8102 BAYARD ROAD
City-St-Zip: FORT PIERCE, FL 34951

Title: VP () Delete
Name: BUCHANON, THOMAS M
Address: 6309 DELEON AVE
City-St-Zip: FORT PIERCE, FL 34951

Title: ST () Delete
Name: BUCHANON, DONNA L
Address: 6309 DELEON AVE
City-St-Zip: FORT PIERCE, FL 34951

Title: T () Delete
Name: BUCHANON, DONNA L
Address: 6309 DELEON AVE
City-St-Zip: FORT PIERCE, FL 34951

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:

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: GREGGORY A BUCHANON

PRES

10/24/2008

Electronic Signature of Signing Officer or Director

Date