

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P97000037831

Entity Name: KEN SHAMBLIN BUILDERS, INC.

FILED
Oct 06, 2005
Secretary of State

Current Principal Place of Business:

1401 BELL SHOALS ROAD
BRANDON, FL 33511

New Principal Place of Business:

Current Mailing Address:

1401 BELL SHOALS ROAD
BRANDON, FL 33511

New Mailing Address:

FEI Number: 59-3447289

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHARON LEE SHAMBLIN
1401 BELL SHOALS ROAD
BRANDON, FL 33511 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: SHARONLEE SHAMBLIN

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: V () Delete
Name: SHAMBLIN, STEPHEN
Address: 1401 BELL SHOALS ROAD
City-St-Zip: BRANDON, FL 33511

Title: P () Delete
Name: SHAMBLIN, KENNETH
Address: 1401 BELL SHOALS ROAD
City-St-Zip: BRANDON, FL 33511

Title: T () Delete
Name: SHAMBLIN, SHARON
Address: 1401 BELL SHOALS ROAD
City-St-Zip: BRANDON, FL 33511

Title: S () Delete
Name: ELDRIDGE, GEORGE
Address: 11509 E. DR. M.L.K. BLVD.
City-St-Zip: MANGO, FL 33550

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 for the exemption stated in Section 119.07(3)(i), 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: SHARONLEE SHAMBLIN

MRS

10/06/2005

Electronic Signature of Signing Officer or Director

Date