

# 2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P97000088751

Entity Name: BARBER PROPERTIES, INC.

FILED  
Dec 23, 2004  
Secretary of State

## Current Principal Place of Business:

PO BOX 1581  
THONOTOSASSA, FL 33592

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 1581  
THONOTOSASSA, FL 33592

## New Mailing Address:

FEI Number: 59-3471564

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

BARBER, DENNIS  
10309 TIMMONS ROAD  
THONOTOSASSA, FL 33592 US

## Name and Address of New Registered Agent:

BARBER, DENNIS W  
10309 TIMMONS ROAD  
THONOTOSASSA, FL 33592 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: DENNIS W. BARBER

12/23/2004

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: BARBER, NATHANIEL L JR  
Address: 8606 WILLIAMS RD  
City-St-Zip: SEFFNER, FL 33584

Title: VP ( ) Delete  
Name: BARBER, DENNIS  
Address: 10309 TIMMONS ROAD  
City-St-Zip: THONOTOSASSA, FL 33592

Title: S ( ) Delete  
Name: BARBER, LINDSAY  
Address: 10309 TIMMONS ROAD  
City-St-Zip: THONOTOSASSA, FL 33592

Title: S ( ) Delete  
Name: BARBER, MYRNA  
Address: 8606 WILLIAMS RD  
City-St-Zip: SEFFNER, FL 33584

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change ( ) Addition  
Name: BARBER, DENNIS W  
Address: 10309 TIMMONS ROAD  
City-St-Zip: THONOTOSASSA, FL 33592

Title: S (X) Change ( ) Addition  
Name: BARBER, LINDSAY C  
Address: 10309 TIMMONS ROAD  
City-St-Zip: THONOTOSASSA, FL 33592

Title: S (X) Change ( ) Addition  
Name: BARBER, MYRNA L  
Address: 8606 WILLIAMS RD  
City-St-Zip: SEFFNER, FL 33584

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: DENNIS W. BARBER

VP

12/23/2004

Electronic Signature of Signing Officer or Director

Date