

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS


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REINSTATEMENT

CORPORATION
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000044377

1. Corporation Name
Warden Construction, Inc.

2. Principal Office Address
1950 Danr Drive, N.E.

3. Mailing Office Address
1950 Danr Drive, N.E.

Suite, Apt. #, etc.

City & State
Palm Bay, FL

Zip Country
32905 USA

4. Date Incorporated or Qualified To Do Business in Florida
May 5, 1998

5. FEI Number
59-3519341

6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name
John K. Huy

Street Address (P.O. Box Number is Not Acceptable)
1950 Danr Drive, N.E.

Suite, Apt. #, Etc.

City
Palm Bay

State Zip Code
FL 32905

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent: *[Signature]* Date: 4-6-01

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P/D	John K. Huy	1950 Danr Drive, N.E.	Palm Bay, FL 32905
VP	Dennis Michael Smith	1950 Danr Drive, N.E.	Palm Bay, FL 32905
VP	Henry Warren Patten	1950 Danr Drive, N.E.	Palm Bay, FL 32905
S/T/D	Cynthia A. Huy	1950 Danr Drive, N.E.	Palm Bay, FL 32905

10. I certify that I am an officer or director of the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0101 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(b), F.S. The information included on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: *[Signature]* JOHN K. HUY PRESIDENT Date: 4-6-01 321-723-3571

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Calling Phone #