## 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P98000060232

Entity Name: HOME TOUCH CONSTRUCTION, INC.

FILED Apr 29, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4023 CHICORA WOOD PLACE 1994 HOVINGTON CIRCLE EAST JACKSONVILLE, FL 322247696 JACKSONVILLE, FL 32246

Current Mailing Address: New Mailing Address:

4023 CHICORA WOOD PLACE
JACKSONVILLE, FL 322247696

1994 HOVINGTON CIRCLE EAST
JACKSONVILLE, FL 322246

FEI Number: 59-3520953 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:

RABON, DENNY G
4023 CHICORA WOOD PLACE
JACKSONVILLE, FL 322247696 US

RABON, DENNY G
1994 HOVINGTON CIRCLE EAST
JACKSONVILLE, FL 322246 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: DENNY G. RABON 04/29/2007

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: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name:RABON, DENNY GName:RABON, DENNY GAddress:4023 CHICORA WOOD PLACEAddress:1994 HOVINGTON CIRCLE EAST

Address: 4023 CHICORA WOOD PLACE Address: 1994 HOVINGTON CIRCLE EAST City-St-Zip: JACKSONVILLE, FL 322247696 City-St-Zip: JACKSONVILLE, FL 322246

 $\label{eq:title:V} {\sf Title:} \qquad {\sf V} \qquad {\sf ( ) Delete} \qquad \qquad {\sf Title:} \qquad {\sf V} \qquad {\sf (X) Change ( ) Addition}$ 

Name: RABON, SHU C Name: RABON, SHU C

Address: 4023 CHICORA WOOD PLACE Address: 1994 HOVINGTON CIRCLE EAST City-St-Zip: JACKSONVILLE, FL 322247696 City-St-Zip: JACKSONVILLE, FL 322246

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: DENNY G. RABON P 04/29/2007