

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P98000080949

FILED
Sep 29, 2005
Secretary of State

Entity Name: VICKERS GENERAL CONTRACTOR, INC.

Current Principal Place of Business:

3938 SUNBEAM ROAD
SUITE 4
JACKSONVILLE, FL 32257

New Principal Place of Business:

POST OFFICE BOX 5459
JACKSONVILLE, FL 32247

Current Mailing Address:

POST OFFICE BOX 5459
JACKSONVILLE, FL 32247

New Mailing Address:

FEI Number: 30-0079821

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VICKERS, DAVID W
3938 SUNBEAM ROAD
SUITE 4
JACKSONVILLE, FL 32257 US

Name and Address of New Registered Agent:

VICKERS, DAVID W
POST OFFICE BOX 5459
JACKSONVILLE, FL 32247 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: DAVID W VICKERS

09/29/2005

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: PTS () Delete
Name: VICKERS, DAVID W
Address: 3938 SUNBEAM ROAD SUITE 4
City-St-Zip: JACKSONVILLE, FL 32257

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTS (X) Change () Addition
Name: VICKERS, DAVID W
Address: POST OFFICE BOX 5459
City-St-Zip: JACKSONVILLE, FL 32247

Title: VP () Change (X) Addition
Name: VICKERS, STEPHANIE
Address: POST OFFICE BOX 5459
City-St-Zip: JACKSONVILLE, FL 32247

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: DAVID W VICKERS

PRES

09/29/2005

Electronic Signature of Signing Officer or Director

Date