

# 2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P99000003049

**FILED**  
**May 12, 2005**  
**Secretary of State**

**Entity Name:** COUCH PAVER INSTALLERS, INC.

**Current Principal Place of Business:**

40962 U.S. HWY 19 N  
TARPON SPRINGS, FL 34689

**New Principal Place of Business:**

36410 U.S. HWY 19 N.  
PALM HARBOR, FL 34684

**Current Mailing Address:**

40962 U.S. HWY 19 N  
TARPON SPRINGS, FL 34689

**New Mailing Address:**

36410 U.S. HWY 19 N.  
PALM HARBOR, FL 34684

**FEI Number:** 59-3075960

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

COUCH, LARRY G  
18735 LAWSFORD DR  
HUDSON, FL 34667 US

**Name and Address of New Registered Agent:**

COUCH, LARRY G  
18735 LANSFORD DR.  
HUDSON, FL 34667 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: LARRY COUCH

05/12/2005

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: PS ( ) Delete  
Name: COUCH, LARRY G  
Address: 40962 U.S. HWY 19 N  
City-St-Zip: TARPON SPRINGS, FL 34689

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PS (X) Change ( ) Addition  
Name: COUCH, LARRY G  
Address: 36410 U.S. HWY 19 N.  
City-St-Zip: PALM HARBOR, FL 34684

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: LARRY COUCH

PS

05/12/2005

Electronic Signature of Signing Officer or Director

Date