

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P99000017560

FILED  
Nov 10, 2009  
Secretary of State

Entity Name: KIMBERLY M. HOUSTON ROOFING, INC.

## Current Principal Place of Business:

43189 EGGER PLACE  
NONE  
CALLAHAN, FL 32011 US

## New Principal Place of Business:

## Current Mailing Address:

P O BOX 105  
NONE  
BRYCEVILLE, FL 320090105 US

## New Mailing Address:

FEI Number: 59-3559900      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HOUSTON, KIMBERLY M  
43189 EGGER PLACE  
NONE  
CALLAHAN, FL 32011 US

## Name and Address of New Registered Agent:

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: KIMBERLY HOUSTON

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: DPT ( ) Delete  
Name: HOUSTON, KIMBERLY M  
Address: 43189 EGGER PLACE  
City-St-Zip: CALLAHAN, FL 320119202 US

Title: DS ( ) Delete  
Name: BLAIR, THOMAS A  
Address: 54311 EVERGREEN TRAIL  
City-St-Zip: CALLAHAN, FL 320117874 US

Title: NONE ( ) Delete  
Name: NONE, NONE  
Address: NONE  
City-St-Zip: CALLAHAN, FL 32011 US

Title: NONE ( ) Delete  
Name: NONE, NONE  
Address: NONE  
City-St-Zip: CALLAHAN, FL 32011 US

Title: NONE ( ) Delete  
Name: NONE, NONE  
Address: P O BOX 1670 449672 US HWY 301  
City-St-Zip: CALLAHAN, FL 32011 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: KIMBERLY HOUSTON

Electronic Signature of Signing Officer or Director

PRES

11/10/2009

Date