


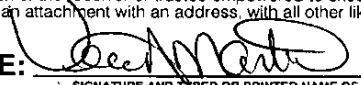


2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P99000057912 1. Entity Name TANNER CONSTRUCTION & INVESTMENTS, INC.						FILED 05 JAN 11 PM 5:45 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Place of Business 2606 SOUTH STREET LEESBURG, FL 34748				Mailing Address 2606 SOUTH STREET LEESBURG, FL 34748			
2. Principal Place of Business 719 MILLER CREEK RD		3. Mailing Address 719 Miller Creek Road		 REINSTATEMENT 04-05 010620053 JHE/11/05 010620053 JHE/11/05			
Suite, Apt. #, etc.		Suite, Apt. #, etc.					
City & State CRYSTAL RIVER, FL		City & State CRYSTAL RIVER, FL					
Zip 34428		Country USA		Zip 34428		Country USA	
4. FEI Number 59-3701593				<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6.-Name and Address of Current Registered Agent SMITH, PHILLIP S 1000 W MAIN STREET LEESBURG, FL 34748				7.- Name and Address of New Registered Agent Name Same Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code			
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE:  VERA A. MARTIN Sec/Treas. 01/06/05 <small>(NOTE: Registered Agent signature required when reinstating)</small>							
FILE NOW!!! FEE IS \$300.00				In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.			
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE P		<input type="checkbox"/> Delete		TITLE P MARTIN, MR		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME MARTIN, M R		STREET ADDRESS 2606 SOUTH STREET		NAME 719 Miller Creek Rd		STREET ADDRESS Crystal, FL 34428	
CITY-ST-ZIP LEESBURG, FL 34748		CITY-ST-ZIP CRYSTAL, FL 34428		CITY-ST-ZIP CRYSTAL, FL 34428		CITY-ST-ZIP CRYSTAL, FL 34428	
TITLE ST		<input type="checkbox"/> Delete		TITLE ST		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME MARTIN, VERA		STREET ADDRESS 2606 S STREET		NAME MARTIN, VERA		STREET ADDRESS 719 Miller Creek Rd.	
CITY-ST-ZIP LEESBURG, FL 34748		CITY-ST-ZIP LEESBURG, FL 34748		CITY-ST-ZIP CRYSTAL RIVER, FL 34428		CITY-ST-ZIP CRYSTAL RIVER, FL 34428	
TITLE 		<input type="checkbox"/> Delete		TITLE 		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME 		STREET ADDRESS 		NAME 		STREET ADDRESS 	
CITY-ST-ZIP 		CITY-ST-ZIP 		CITY-ST-ZIP 		CITY-ST-ZIP 	
TITLE 		<input type="checkbox"/> Delete		TITLE 		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME 		STREET ADDRESS 		NAME 		STREET ADDRESS 	
CITY-ST-ZIP 		CITY-ST-ZIP 		CITY-ST-ZIP 		CITY-ST-ZIP 	
12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.							
SIGNATURE:  VERA A. MARTIN 01/06/05 352-267-4094 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				Sec/Treas <small>Date Daytime Phone #</small>			