2007 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Nov 07, 2007
Secretary of State

DOCUMENT# S15552

Entity Name: BW PROPERTIES OF NW FLA., INC.

Current Principal Place of Business:

C/O BOBBY WARNER
524 E. ZARAGOZA ST.
PENSACOLA, FL 32501 US

New Principal Place of Business:

Current Mailing Address:

1804 E LARUA STREET
PENSACOLA, FL 32501 US

New Mailing Address:

38 S. BLUE ANGEL PARKWAY, #234
PENSACOLA, FL 32507 US

FEI Number: 59-3044998 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WARNER, BOBBY
1804 E LARUA STREET
PENSACOLA, FL 32501 US

Name and Address of New Registered Agent:

WARNER, BOBBY L MS.
38 S. BLUE ANGEL PARKWAY, #234
PENSACOLA, FL 32507 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: BOBBY L. WARNER 11/07/2007
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:

Title: PST ( ) Delete
Name: WARNER, BOBBY
Address: 1804 E LA RUA STREET
City-St-Zip: PENSACOLA, FL 32501

Title: VD ( ) Delete
Name: WARNER, BOBBY
Address: 1804 E LA RUA STREET
City-St-Zip: PENSACOLA, FL 32501

Title: T (X) Delete
Name: STEPHENS, DON
Address: 1804 E. LA RUA STREET
City-St-Zip: PENSACOLA, FL 32501

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change ( ) Addition
Name: WARNER, BOBBY L MS.
Address: 38 S. BLUE ANGEL PARKWAY #234
City-St-Zip: PENSACOLA, FL 32507

Title: VD (X) Change ( ) Addition
Name: WARNER, BOBBY L MS.
Address: 38 S. BLUE ANGEL PARKWAY #234
City-St-Zip: PENSACOLA, FL 32507

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: BOBBY L. WARNER MS. 11/07/2007
Electronic Signature of Signing Officer or Director Date