

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# V55243

**FILED**  
**Jul 12, 2011**  
**Secretary of State**

**Entity Name:** BESTWAY PORTABLE BUILDINGS, INC.

**Current Principal Place of Business:**

2815 EAST 15TH STREET  
PANAMA CITY, FL 32405 US

**New Principal Place of Business:**

**Current Mailing Address:**

2815 EAST 15TH STREET  
PANAMA CITY, FL 32405 US

**New Mailing Address:**

**FEI Number:** 59-3155801

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KOPPEL, MIKE D  
2815 EAST 15TH STREET  
PANAMA CITY, FL 32405 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:** MIKE KOPPEL

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** KOPPEL, MICHAEL D  
**Address:** 2815 EAST 15TH STREET  
**City-St-Zip:** PANAMA CITY, FL 32405

**Title:** VP  
**Name:** KOPPEL, DALE M  
**Address:** 3614 HIGHWAY 90  
**City-St-Zip:** MARIANNA, FL 32446

I hereby 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 all other like empowered.

**SIGNATURE:** MIKE KOPPEL

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

P

07/12/2011

\_\_\_\_\_  
Date