PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

98 NOV -5 PM 3:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 320354

1. Corporation Name

GIBSON INDUSTRIES, INC.

Principal Place of Business	Mailing Address
1390 Swearingen Av. Bartow, Fl. 33830	

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable	3. New Mailing Office Address, If Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. Date Incorporated or Qualified To Do Business In Florida: Feb. 14, 1968

5. FEI Number: 59-1206698 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
PRES.	W. O. GIBSON	1390 SWEARINGEN AV.	BARTOW, Fl. 33830
			600002684586--1 -11/10/98--01066--001 ****315.00 ****315.00

8. Name and Address of Current Registered Agent

W. O. GIBSON
1390 SWEARINGEN AV.
BARTOW, FL. 33830

9. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, Etc.

City | State: FL | Zip Code

CR2E040 (1/96)

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent: W. O. Gibson — REGISTERED AGENT MUST SIGN — Date: 11-3-98

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes ☒ No ☐ (See other side for information on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: W. O. Gibson — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date: 11-3-98 — Daytime Phone #: 941-533-6385

2082

GIBSON INDUSTRIES, INC.
P. O. BOX 2434
BARTOW, FL. 33821

NOVEMBER 3, 1998

Gentlemen:

Please find enclosed application for re-instatement for the above. On the 30th of October, I contacted your office and talked with "Shawn" in reference to the cancellation of our Corporate Charter September 26, 1997.

In our conversation, I told him I was located in Bartow and he indicated your communication had been to Lakeland and returned unclaimed. Shawn indicated this was probably the reason for cancellation and asked me to return the enclosed application with a check for $315.00 which would cover re-instatement.

Thank you for your consideration and our apologies for the mix-up.

Very truly yours,

Walter O. Gibson