

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

03 FEB -4 AM 11:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # PO1000082460

1. Corporation Name

Gilvin Enterprises, Inc.
1422 Paula Drive
Apopka FL 32703

2. Principal Office Address

1422 Paula Drive

Suite, Apt. #, etc.

3. Mailing Office Address

1422 Paula Drive

Suite, Apt. #, etc.

City & State

Apopka, FL

City & State

Apopka, FL

Zip

32703

Country

Zip

32703

Country

U.S.

4. Date Incorporated or Qualified To Do Business in Florida

082001

5. FEI Number

06-1671385

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name Jerry W. Gilvin

Street Address (P.O. Box Number is Not Acceptable) 1422 Paula Drive

Suite, Apt. #, Etc.

City Apopka

State FL

Zip Code 32703

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent

Jerry Gilvin
REGISTERED AGENT MUST SIGN

Date 1-29-03

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

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	JERRY W. GILVIN	1422 PAULA DRIVE	APOPKA, FL 32703
VP	KEITH C. BOURCIER	2209 ORCHARD DRIVE	APOPKA, FL 32712
AVP	DAVE MARVIN	1111 HENRY STREET	APOPKA, FL 32703

10. 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)(j), 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:

Jerry Gilvin
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-29-03

Date

407-886-0340

Daytime Phone #

CR2E081 (10/02)

2/21/03

GILVIN ENTERPRISES, INC.
1422 PAULA DRIVE
APOPKA, FL 32703
407/886-0340

January 29, 2003

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Re: ~~Gilvin Enterprises, Inc., P01000082460~~

Dear Sirs:

Please accept the enclosed Corporate Reinstatement for the above named corporation. We incorporated on 8-20-01 and did not receive an annual report. I am enclosing a check for \$300.00 to pay for the filing fees for 2002 and 2003.

Thank You.


Jerry Gilvin
President