

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 JUL 30 PM 12:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000034312

1. Corporation Name

VANROD, INC.

4603 BRAYTON TERRACE NORTH
SAME AS ABOVE

2. Principal Office Address

4603 BRAYTON TERRACE NORTH

Suite, Apt. #, etc.

3. Mailing Office Address

SAME AS ABOVE

Suite, Apt. #, etc.

City & State

PALM HARBOR FLORIDA

City & State

Zip

34685

Country

USA

Zip

Country

4. Date Incorporated or Qualified

To Do Business in Florida MARCH 22ND 2002

5. FEI Number

01-0650907

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

DANIEL J. HANLEY

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

7241 DEERFIELD DRIVE

Suite, Apt. #, Etc.

City

PORT RICHEY

State
FL

Zip Code
34668

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

[Signature of Daniel J. Hanley]
REGISTERED AGENT MUST SIGN

Date 07/20/2004

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
PRES	RODNEY JANELLE	4603 BRAYTON TERRACE NORTH	PALM HARBOR FL 34685

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)(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:

[Signature of Rodney W. Janelle]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-21-04 27-515-6057

Date

Daytime Phone #

CR25081 (01/04)