

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # **P96000069918**

1. Corporation Name

CHECKER AIRPORT TRANSPORTATION, INC.

Principal Place of Business	Mailing Address
3252 PALM AVENUE FORT MYERS FL 33901	3252 PALM AVENUE FORT MYERS FL 33901

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

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

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4. Date Incorporated or Qualified To Do Business in Florida **08/21/1996**

5. FEI Number **65-0692526**

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)

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
DPST	GRIFFIN, JUDY F	3252 PALM AVENUE 2101 SE 19 th Lane	FORT MYERS FL 33901 CAPE CORAL, FL 33990

8. Name and Address of Current Registered Agent

GRIFFIN, JUDITH
~~2790 OW 66TH TERRACE~~
 CAPE CORAL FL 33914

9. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)
 2101 SE 19 LANE

Suite, Apt. #, Etc.

City
 CAPE CORAL

State
 FL

Zip Code
 33990

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 *Judith Griffin* **REGISTERED AGENT MUST SIGN** Date **Oct 25, 2001**

11. 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: *Judith Griffin* **REGISTERED AGENT MUST SIGN** Date **Oct 25, 2001** Daytime Phone # **941-337-4005**

CR2E040 (8/01)

BLUEBIRD TAXI

3252 Palm Ave., Ft. Myers, FL 33901

(941) 337-4005 • (941) 332-1712

Fax: (941) 337-5809

OCTOBER 25, 2001

DIVISION OF CORPORATIONS
ANNUAL REPORT/REINSTATEMENT SECTION
P.O. BOX 6327
TALLAHASSEE, FL 32314-6327

TO WHOM IT MAY CONCERN:

THIS LETTER IS TO INFORMED THE FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS THAT CHECKER AIRPORT TRANSPORTATION, INC DID NOT RECEIVED THERE APPLICATION TO FILE ITS 2001 CORPORATION ANNUAL REPORT. WE DID HOWEVER, RECEIVE THE NOTICE OF ADMINISTRATIVE DISSOLUTION IN THE MAIL; THUS I CALLED THE DIVISION OF CORPORATIONS AND WAS TOLD TO WRITE A LETTER OF EXPLANATION, FILL OUT PAPERWORK AND ENCLOSED A CHECK FOR \$150.00, AND WE WOULD BE REINSTATED.

THANK YOU FOR YOUR ATTENTION TO THIS MATTER.

SINCERELY,



JUDY F. GRIFFIN
PRESIDENT

Licensed & Insured

Radio Dispatched • Pick up & Delivery • Air Conditioned Vehicles • 24 Hour Service