

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 MAR 25 PM 1:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P98000060167

1. Corporation Name

BK AND DV, INC.

2. Principal Office Address

1401 Manatee Avenue W.

Suite, Apt. #, etc.

Suite 600

City & State

Bradenton, FL

Zip

34205

Country

U.S.A.

3. Mailing Office Address

1401 Manatee Avenue W.

Suite, Apt. #, etc.

Suite 600

City & State

Bradenton, FL

Zip

34205

Country

U.S.A.

4. Date Incorporated or Qualified
To Do Business in Florida

07/08/1998

5. FEI Number

65-0847999

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

R. Ted Nipper

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

1401 Manatee Avenue West

Suite, Apt. #, Etc.

Suite 600

City

Bradenton

State

FL

Zip Code

34205

800030473318

03/15/04--01048--004 **900.00

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

R. Ted Nipper

REGISTERED AGENT MUST SIGN

Date March 9, 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
PD	David A. Varnadore	Suite 600 1401 Manatee Avenue W.	Bradenton, FL 34205
VSTD	Robert W. Kelly	Suite 600 1401 Manatee Avenue W.	Bradenton, FL 34205

REINSTATEMENT

03-04

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:

David A. Varnadore

David A. Varnadore, Pres.

03/09/2004

(941) 746-6567

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CFR2E081 (01/04)