

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 AUG -8 PM 2:15

DOCUMENT # **V50484**

1. Corporation Name

CANTONMENT TIMBER COMPANY, INC.
1420 HWY 297-A
CANTONMENT, FL 32533

600058349366
08/08/05--01063--012 **1350.00

2. Principal Office Address

1420 Hwy 297A

Suite, Apt. #, etc.

3. Mailing Office Address

3391 Wild Turkey Rd

Suite, Apt. #, etc.

REINSTATEMENT 01-05

City & State

Cantonment, FL

Zip **32533**

Country **ESC**

City & State

Cantonment, FL

Zip **32533**

Country **ESC**

4. Date Incorporated or Qualified To Do Business in Florida

5. FEI Number

59 313230 - 6

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 C Griffith

Street Address (P.O. Box Number)
**1420 HWY 297-A
CANTONMENT, FL 32533**

Suite, Apt. #, Etc.

City

State
FL

Zip Code

32533

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

Daniel C Griffith
REGISTERED AGENT MUST SIGN

Date **7-14-05**

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	Daniel C. Griffith	1420 Hwy 297A	Cantonment, FL 32533
Vice	Danny Ray Griffith	840 Well Lane Rd	Cantonment, FL 32533

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:

Daniel C Griffith
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-14-05

Date

850 968 2506

Daytime Phone #

CR2E081 (01/05)