PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FLORIDA DEPARTMENT OF STATE **APPLICATION** Katherine Harris FORAW Secretary of State FILED REINSTATEMENT DIVISION OF CORPORATIONS 99 JUN -9 PH 12: 16 DOCUMENT # G43985 1. Corporation Name SECRETARY OF STATE TALLAHASSEE, FLORIDA ANCHOR RARE COINS, INC. Principal Place of Business Mailing Address 900 E Prima Vista Blvd. Port St. Lucie, FL 34952 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 Date Incorporated or Qualified To Do Business in Florida 2466 SE Federal Highway 06/16/83 Suite, Apt. #, etc. Suite, Apt. #, etc 5. FEI Number Applied For City & State City & State 0-0718496 \_Stuart, FL \$8.75 Additional Fee required Zıp Country CERTIFICATE OF STATUS DESIRED 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) Name of Officers Street Address of Each and/or Directors Officer and/or Director
(Do NOT Use Post Office Box Numbers) City / State / Zip Title(s) 2466 SE Federal Highway Stuart, FL 34994 PD JEFFREY L. MORGAN D FRED R. MORGAN II 2466 SE Federal Highway Stuart, FL 34994 00002905931---06/16/99--01004--019 \*\*\*1200.00 \*\*\*1200.00 9. Name and Address of New Registered Agent 8. Name and Address of Current Registered Agent Beth Teardo Prinz ROBERT L. SEELEY, ESQ. Street Address (P.O. Box Number is Not Acceptable) 900 E Prima Vista Blvd. Port St. Lucie, FL 34952 Suite, Apt #, E1c State Zip Code Stuart 34994 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 June 🎖 , 1999 11. This corporation owes the current year (See other side for information on intangible tax.) Intangible Personal Property Tax due June 30. Yes 🗀 12. Locatify that Lam 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 or diffy that when filling 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. C|8|99 Z 785 9111

SIGNATURE: 4

SIGNATURE AND THE PHINTED NAME OF SIGNING OFFICER OR DIRECTOR JETTER B. Morgan, President