

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

2009 JAN 15 AM 9:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

700141493257
01/20/09--01057--014 **\$3150.00
CR2E081 (12/08)

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # #238276

1. Corporation Name

HUTTON BROTHERS, INC.

2. Principal Office Address - No P.O. Box #

1109 FREDRICK LN

Suite, Apt. #, etc.

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

BRANDON FL

City & State

FLORIDA

Zip

33511

Country

Hills

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

07/07/1960

5. FEI Number

238276390

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

CHARLES HUTTON

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

1109 FREDRICK LN

Suite, Apt. #, Etc.

City

BRANDON

State

FL

Zip Code

33511

☒ The reinstatement fee is imposed, except in
circumstances which the entity did not receive
the prior notices. By checking this box, you
are certifying the prior notices were not
received and requesting the reinstatement
fee be waived.

\$3150.00

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

Charles Hutton

REGISTERED AGENT MUST SIGN

Date 01-14-09

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	Charles Hutton	1109 FREDRICK LN	BRANDON FL 33511
VP	GEORGE HUTTON	115 LITHIA RD	BRANDON FL 33511
SEC	FRED HUTTON	1001 EDGEMONT	BRANDON FL 33509

REINSTATEMENT

89-09

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 I filed 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 contained in Chapter 119, 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:

Charles Hutton 01-14-09

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

813-681-9944