


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS		FILED 08 JAN 15 AM 8:57 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
DOCUMENT # 264770					
1. Corporation Name CHATTAHOOCHEE ACE HARDWARE, INC.					
2. Principal Office Address - No P.O. Box # 211 West Washington Street			3. Mailing Office Address P.O. Box 1046		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State Chattahoochee FL			City & State Bainbridge GA		
Zip 32324	Country USA	Zip 39818	Country USA	4. Date Incorporated or Qualified To Do Business in Florida 12/11/1962	
5. FEI Number 59 1033091				<input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable	
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>				\$8.75 Additional Fee required for a Certificate of Status	
7. Name and Address of Current Registered Agent					
Name MICHAEL C. HALL					
Street Address (P.O. Box Number Is Not Acceptable) 1244 Angus Morrison Road					
Suite, Apt. #, Etc.					
City Panacea			State FL	Zip Code 32346	
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 <i>Michael C. Hall</i>				Date 1/11/2008	
REGISTERED AGENT MUST SIGN					
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	
P/D	WILTON B. REYNOLDS, JR.	322 Flint River Hts. Road		Bainbridge, GA 39817	
V/S/T/D	MARTHA REYNOLDS	322 Flint River Hts. Road		Bainbridge, GA 39817	
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 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: <i>W B Reynolds Jr</i>				Date 1/11/2008	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Daytime Phone #	

REINSTATEMENT 03-08

2/1/18