PLEASE READ ALL INSTRUCTIONS BEFORE COM

08-07-2001 90022 004 ***150.00

345746
FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 AUG 16 PM 2:25

774229

CORPORATION REINSTATEMENT October

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 345746

1. Corporation Name

John F. Simpson Stables, Inc.

2. Principal Office Address	**3.** Mailing Office Address
P O Box 1053	P O Box 1053
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Hanover PA	City & State: Hanover PA
Zip: 17331-7053 Country:	Zip: 17331-7053 Country:

4. Date Incorporated or Qualified To Do Business in Florida: 1947

5. FEI Number: 59-1260448 ☐ 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: Georgia C. Simpson

Street Address (P.O. Box Number is Not Acceptable): ~~51 High Rock Rd~~ 25750 SR 46A

Suite, Apt. #, Etc.:

City: ~~Hanover~~ Sorrento ~~PA~~ FL State: ~~PA~~ FL Zip Code: ~~17331-7053~~ 32776

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0603, F.S.

Signature of Registered Agent: Georgia C. Simpson — REGISTERED AGENT MUST SIGN — Date: July 12, 2001

CR2E081 (9/00)

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	James W. Simpson	51 High Rock Rd	Hanover PA 17331-7053
V-Pres	Georgia C. Simpson	51 High Rock Rd	Hanover PA 17331-7053
Sec/Treas.	"	"	

8/8/16

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: Georgia C. Simpson — Georgia C. Simpson — 7/12/01 — 717-633-6717

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Attachment
#345746
774229

John F. Simpson Stables Inc.
P O Box 1053
Hanover PA 17331-7053
717-633-6717
FAX 717-633-7546
FL 352-438-1334

July 12, 2001

Department of State
Division of Corporations
409 East Gaines St
Tallahassee FL 32399

Re.: Incorrect mailing address used for 2001 Uniform Business Report for John F. Simpson Stables, Inc., FEI 59-1260448

Dear Department of State:

Please find enclosed a check for $150.00 to cover filing the Uniform Business Report. Our records will show payment every year prior to 2001 on time. I never received the document this year and suspect it was mailed to the physical address, where we do not receive mail. Please see that the mailing address is:

John F. Simpson Stables Inc.
P O Box 1053
Hanover PA 17331-7053

Thank you very much,

Georgia Simpson

Georgia Simpson, Secretary