

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

04 AUG 10 AM 10:03

DOCUMENT # 357675

**1. Corporation Name**

J. N. T. PROPERTIES, INC

525 JOHN KNOX RD  
P. O. BOX 6007

**2. Principal Office Address**

525 JOHN KNOX RD

Suite, Apt. #, etc.

SUITE C

City & State

TALLAHASSEE, FLORIDA

Zip

32301

Country

USA

**3. Mailing Office Address**

P. O. BOX 6007

Suite, Apt. #, etc.

City & State

TALLAHASSEE, FLORIDA

Zip

32314

Country

USA

REINSTATEMENT 02-04

**4. Date Incorporated or Qualified**

To Do Business in Florida JANUARY 5, 1970

**5. FEI Number**

59-1288618

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

FRANK S. SHAW III

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

3520 THOMASVILLE RD.

Suite, Apt. #, Etc.

4TH FLOOR

City

TALLAHASSEE

State

FL

Zip Code

32308

**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

REGISTERED AGENT MUST SIGN

Date

8/5/04

**9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)**

| Titles | Name of<br>Officers and/or Directors | Street Address of Each<br>Officer and/or Director | City / State / Zip         |
|--------|--------------------------------------|---|----------------------------|
| P      | JAMES N. TOOKES                      | 925 EAST MAGONOLIA # C-5                          | TALLAHASSEE, FLORIDA 32301 |
| VP/TR  | GERALD R. TOOKES                     | 1149 RONDS POINTE DRIVE WEST                      | TALLAHASSEE FLORIDA 32312  |
| SEC.   | THOMAS J. GRIFFIN                    | 1201 SPRINGHAVEN RD                               | TALLAHASSEE, FLORIDA 32317 |
|        |                                      |   |                            |
|        |                                      |   |                            |
|        |                                      |   |                            |

**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)(f), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

8-5-04

Daytime Phone #

850-877-7037

CR2E081 (01/04)

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

04 AUG 10 AM 10:03

**FLORIDA DEPARTMENT OF STATE  
SECRETARY OF STATE  
DIVISION OF CORPORATION**

**DEAR MADAM:**

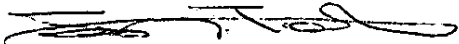
**AUGUST 5, 2004**

**I WOULD LIKE TO HAVE THE FOLLOWING CORPORATION RE-INSTATED  
EFFECTIVE IMMEDIATELY.**

**I DID NOT RECEIVE IN THE MAIL THE ANNUAL REPORT IN THE YEAR 2002.**

**THANK YOU FOR THIS CONSIDERATION.**

**KIND REGARDS,**



**JAMES N. TOOKES, PRESIDENT  
J.N.T. PROPERTIES, INC.**