

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



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

DOCUMENT # 484756

1 Corporation Name
GEORGE W. JORDAN & SON, INC.

Principal Place of Business Mailing Address
2820 NW 106 AVE. SAME
CORAL SPRINGS, FL 33065

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
Suite, Apt. #, etc
City & State
Zip Country

4 Date Incorporated or Qualified To Do Business in Florida 9-19-75
5 FEI Number 59-1620697 Applied For Not Applicable
6 CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required 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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
	VIRGINIA JORDAN	2820 NW 106 AVE.	CORAL SPRINGS, FL 33065

REINSTATEMENT 94-99
T3 3/16/99

8. Name and Address of Current Registered Agent
VIRGINIA JORDAN
2820 NW 106 AVE.
CORAL SPRINGS, FL 33065

9. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
Suite, Apt. #, Etc
City
State FL Zip Code

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 Virginia M. Jordan
REGISTERED AGENT MUST SIGN Date: 2-17-99

11. This corporation owes the current year Intangible Personal Property Tax due June 30. Yes No (See other side for information on intangible tax.)

12. 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: Virginia M. Jordan
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR VIRGINIA JORDAN, PRESIDENT
Date: 954/752-5714
Daytime Phone #

CR2E081 (12/98)