

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 637895

1. Corporation Name **FELNER CONSTRUCTION, INC.**

REINSTATEMENT 07-04  
200032484062  
04/12/04--01093--001 \*\*300.00

2. Principal Office Address

6235 FLORIDIAN CIRCLE

Suite, Apt. #, etc.

City & State

LAKE WORTH FLORIDA

Zip

33463

Country

USA

3. Mailing Office Address

SAME

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

5. FEI Number

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

JEFFREY S. FELNER

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

6235 FLORIDIAN CIRCLE

Suite, Apt. #, etc.

City

LAKE WORTH

State

FL

Zip Code

33463

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

*Jeffrey S. Felner*  
REGISTERED AGENT MUST SIGN

Date April 8, 2004

**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   |
|--------|--------------------------------------|---------------------------------------------------|----------------------|
| PRES   | Jay Felner                           | 6235 Floridian Circle                             | Lake Worth, FL 33463 |
| VP     | Jeffrey S. Felner                    | 6235 Floridian Circle                             | Lake Worth, FL 33463 |
|        |                                      |                                                   |                      |
|        |                                      |                                                   |                      |
|        |                                      |                                                   |                      |

10. I certify that I am an officer or director of 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 taxes 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:

*Jeffrey S. Felner*  
SIGNATURE AND TYPE OF PERSON NAME OF SIGNING OFFICER OR DIRECTOR

Jeffrey S. Felner 4/8/04 966-0879  
Date Daytime Phone



**Felner Construction, Inc.**

250 SE 10th Street  
Delray Beach , FL 33483

Ph. (561) 276-7355  
Fax (561) 276-7315

April 9, 2004

Please be advised that we did not receive the Annual Report for 2003 nor for 2004. We would like to have Felner Construction, Inc. reinstated (Document #637895) and am enclosing a check for 2003/2004.

Thank you,

Jeffrey S. Felner, V.P.