

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

03 DEC -9 PH 2:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 763526

1. Corporation Name

VETERANS HOLDING COMPANY OF
BRADEN RIVER, INC.

2. Principal Office Address

6451A 19th St E

Suite, Apt. #, etc.

City & State

Sarasota FL

Zip

34243

Country

US

3. Mailing Office Address

6451A 19th St E

Suite, Apt. #, etc.

City & State

Sarasota FL

Zip

34243

Country

USA

REINSTATEMENT 07

4. Date Incorporated or Qualified
To Do Business in Florida

06/02/82

5. FEI Number

311024008

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

Steven P Solomon

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

6451A 19th St E

Suite, Apt. #, Etc.

City

Sarasota

State

FL

Zip Code

34243

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

Steven P Solomon
REGISTERED AGENT MUST SIGN

Date 12/5/03

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	Henry J Hunt	5316 53 rd Ave E - Lot J-6	Bradenton, FL 34203
Secy	Steven P Solomon	7416 Oak Grove Circle Sarasota	Sarasota, FL 34243
Treas	George R. Corkwell	75 Eagle Circle	Ellenton, FL 34222

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:

Henry J Hunt
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12-5-03

Date

941-758-9514

Daytime Phone #

CR2E081 (10/02)