

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

03 NOV 24 AM 10:37

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # 838444**

**1. Corporation Name**

Jackson and Tull  
Chartered Engineers

**2. Principal Office Address**

2705 Bladensburg Rd., NE

Suite, Apt. #, etc.

City & State

Washington, DC

Zip

20018

Country

U.S.A.

**3. Mailing Office Address**

Same as #2

Suite, Apt. #, etc.

City & State

**4. Date Incorporated or Qualified  
To Do Business in Florida**

05/18/77

**5. FEI Number**

52-1004080

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

C.T. Corporation

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

1200 South Pine Island Road

Suite, Apt. #, Etc.

City

Plantation,

State

FL

Zip Code

33324

**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

*Stacy Rosenthal* Asst. Sec.  
REGISTERED AGENT MUST SIGN

Date 11/3/03

**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.	Knox W. Tull, Jr.	2805 - 33rd St., SE	Washington, DC 20020
Secretary	Brenda Temple Tull	2805 - 33rd St., SE	Washington, DC 20020

**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:**

*Brenda Temple Tull* Brenda Temple Tull  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Secretary

11/05/03  
Date

202333-9100  
Daytime Phone # ext. 117