

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

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**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

05 DEC 12 PM 12:22

DOCUMENT # **F-00000001917**

1. Corporation Name

Heritage Creations, Inc.
555 Heritage Drive
Jupiter, FL 33458

2. Principal Office Address

555 Heritage Drive

3. Mailing Office Address

555 Heritage Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Jupiter, FL

City & State

Jupiter, FL

Zip

33458

Country

USA

Zip

33458

Country

USA

04-05
BR/13/05 CR2E081 (8/05)

4. Date Incorporated or Qualified To Do Business in Florida		October 2003
5. FEI Number	52-2192471	Applied For Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>		\$875 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name
David W. Gilmour

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

Suite, Apt. #, Etc.

City

Jupiter,

State

FL

Zip Code

33458

700061554967
11/18/05--01058--005 **\$1.25

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

David W. Gilmour

Date **11-9-05**

REGISTERED AGENT MUST SIGN

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
Mr.	Phillip H. Morse, Chairman	194 Birkdale Lane	Jupiter, FL 33458
Mr.	David W. Gilmour, President	48 Stone Meadow Lane	Boston, MA 02339
Mr.	Lew Wise, Vice President	2 Edinburgh Drive North	Palm Beach Gardens, FL 33418

700061554967
12/20/05--01035--014 **\$1.25

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:

David W. Gilmour

11-9-05

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

HERITAGE CREATIONS

DESIGN MASTERS • PROCRAFT

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David W. Gilmour
President

November 9, 2005

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: FEI # 52-2192471
Charter # F00000001917

To Whom It May Concern:

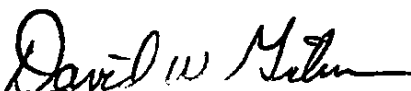
Enclosed please find our completed Corporation Reinstatement application, signed Statement Concerning Authority to Transact Business in Florida as well as a check in the amount of \$61.25 for an annual report fee.

We contacted your office via phone and were told the reinstatement fee would be waived for reasonable cause. The letter/information was sent to an incorrect address and we never received the information. Please see the attached letter with incorrect address. Our accountant, Wojeski & Company received a notice and advised us to fill out the necessary information. Please note the correct address in your system for future correspondence.

Heritage Creations, Inc.
One Namic Place
Glens Falls, NY 12801

Please contact me at (518) 742-4212 with any questions.

Sincerely,


David W. Gilmour
President