

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 NOV 15 PM 1:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT 03-09

DOCUMENT # F00000004656

1. Corporation Name

Douglas Asphalt Company

101 North Peterson Avenue

101 North Peterson Avenue

2. Principal Office Address

101 North Peterson Avenue

3. Mailing Office Address

101 North Peterson Avenue

Suite, Apt. #, etc.

Suite 201

Suite, Apt. #, etc.

Suite 201

City & State

Douglas, Georgia

City & State

Douglas, Georgia

Zip

31533

Country

USA

Zip

31533

Country

USA

4. Date Incorporated or Qualified

To Do Business in Florida 08/16/2000

5. FEI Number

581153967

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

T.S. Madson II, Esq.

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

3401 S.E. Hawthorne Road

Suite, Apt. #, Etc.

City

Gainesville

State

FL

Zip Code

32601

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

Date 11/11/04

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
PTCD	Spivey, Joel H.	12331 Highway 32 West	Ambrose, Georgia 31512
VSD	J. Kyle Spivey	770 Green Willow Drive	Douglas, Georgia 31535

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Joel Spivey

11/11/04

Date

(912) 384-8114

Daytime Phone #