PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORA REINSTATE	_			DEPART Secretary ISION OF CO	of S				AM 11: 34		
DOCUMENT # For 000003386 1. Corporation Name							SECRETARY OF STATE TALLAHASSEE, FLORIDA				
Ford Realty Investment Corp.							ar) 1 5 2 1	74067	മ	
2. Principal Office Address - No P.O. Box # 3. Mailing Office Address								400152740674 04/27/0301805003 **450.00			
372 Marshall	I -	372 Marshall Street			CR2E081 (12/08)						
Suite, Apt. #, etc.							4. Date incorr	porated or Qualifie			
City & State City & State				····			To Do Business in Florida 06/16/2004				
Coldwater, MI			Coldwate	r, MI			5. FEI Number 38-2063325		}	Applied For Not Applicable	
Zip 49036	6 Country USA		^{Zip} 49036		USA	•	6. CERTIFICATI	CERTIFICATE OF STATUS DESIDED \$50.75 Addition		ditional Fee required ertificate of Status	
7. Name and Address of Current Registered Agent											
Name UCC Filing & Search Services, Inc.							The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.				
Street Address (P.O. Box Number is Not Acceptable) 1574 Village Square Blvd											
Suite, Apt. #, Etc. Suite 100											
City Tallahassee				State 32309			ice be walved.				
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the ob- Signature of Registered Agent AST SEC REGISTERED AGENT MUST SIGN								Diligations of section 607.0505 or 617.0503, F.S. Date			
9. Names and Stree	t Addresses	s of Each Officer and	/or Director (Flo	orlda nonprof	it corpo	orations must list at le	ast 3 directors)	<u></u>			
Titles Name of Officers and/or Directors				Street Address of Each Officer and/or Director				 	City / State / Zip		
Pres Jerry L	Jerry L. Ford				392 Progress Drive			Coldwater, MI 49036			
Sec/Tie Mary A	Mary Ann Ford				392 Progress Drive			Coldwater, MI 49036			
											
REINSTATEMENT											
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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 contained in Chapter 119, 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: President 04/21/09 517-279-9548 SIGNATURE: President 04/21/09 517-279-9548 Date Daytime Phone #											