


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS

FILED
05 SEP -9 AM 11:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **F80589**
1. Corporation Name
Country Chicken & Fish, Inc

2. Principal Office Address 1380 1st Street N. Suite, Apt. #, etc.		3. Mailing Office Address P.O. Box 1231 Suite, Apt. #, etc.	
City & State Winter HAVEN, FL		City & State Winter HAVEN, FL	
Zip 33881	Country Polk	Zip 33882	Country Polk

CR2E081 (8/05)

4. Date Incorporated or Qualified To Do Business in Florida 5/10/82	
5. FEI Number 59-2194213	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

7. Name and Address of Current Registered Agent		
Name Ronald J. Bos		
Street Address (P.O. Box Number is Not Acceptable) 1107 5th St. SE.		
Suite, Apt. #, Etc.		
City Winter HAVEN,	State FL	Zip Code 33880

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 Ran Bos	Date 9/8/05
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
TD	RONALD J. Bos	1107 5th St. SE.	Winter HAVEN, FL 33880
SD	Keith S. Klepper	102 LAKE THOMAS Dr	Winter HAVEN, FL 33880
DD	Thomas P. Bos	1625 Old Eagle Lake Dr	Bartow, FL 33830

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: Ronald J. Bos		Date 9/8/05	Daytime Phone # (863) 293-8888
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			