> PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. 00 MAR -6 AM 9: 17 SECRETARY OF STATE TALLAHASSEE, FLORIDA Ż 5891 95 00000 DOCUMENT # 1. Corporation Name 900003164699----6-----03/10/00--01011--015 BORDE ****300.00 ****300.00 ... The M Cracken Comp. ddress 3. Mailing Office Address ton 22cm 900003164699--03/10/00--01011--016 *******8.75 ******8.7 Principal Office Address ******8.75 📾 1019 N. 12th AVE 1019 N. 12th Suite, Apt. #, etc. Suite, Apt. #, etc. 4. Date Incorporated or Qualified 11-30-1995 To Do Business in Florida City & State City & State 5. FEI_Number Applied For ENSACOLA FLORIDA PENSACOLA-ELORIDA Not Applicable Countr 6. \$8.75 Additional Fee required 3250 CERTIFICATE OF STATUS DESIRED IISA 2501 for a Certificate of Status 7. Name and Address of Current Registered Agent Name URNER VETTE O. Box Number is Not Acceptable) Street Address Suite, Apt. #, Etc. Cíty State Zip Code ENSA COLA FL 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. Date 2-24-2 Signature of Registered Agent REGISTERED AGENT MUS 9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Name of Officers and/or Directors Street Address of Each Officer and/or Director Titles City / State / Zip NNETTE TURNER 1600E, 34th St. PENSALOLA FL32503 CHALAN MC CRACKEN 3241 BIRDSEYE CIRCLE GULF BREEZE, FL 32561 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 (untyler 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. はねれをた NE 24-0<u>0</u> 857)-444-SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Davtime Phone Date



1019 N. 12th Avenu Pensacola, FL 32501+335

> 850+444-9690 1-800-261-6082 Fax: 850-444-9677

February 11, 2000

Annual Reports Filings Division of Corporations P O Box 6327 Tallahassee, Fl 32314

Re: Reinstatement of foreign corporation status

I filed an annual report for 1999 and included our payment of \$150.00 in the form of a check and assumed all was taken care of until now. The check never cleared, the new address and other changes were not noted; therefore we never received any notices regarding our status of dissolution. My banker notified me that there was a problem last week. I called to check and indeed confirmed there was a problem.

We need to get the appropriate corrections made and our status corrected. Apparently our filing report and check for 1999 was never received and the resulting dissolution was automatic. We never received notice of this or we would have addressed this earlier

I do not have a copy of my 1998 report but am sending a copy of the 1997 and a copy of the 1999 so that the changes can be made. I have stopped payment on the earlier check and have reissued another to cover 1999 and 2000.

I would appreciate it if this matter can be corrected as soon as possible. If there are any questions concerning this please call or fax me.

Sincerely,

mitte & Juiner Annette G. Turner, President of the McGracken Corporation / Blue Bouder