




PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

<b>APPLICATION FOR REINSTATEMENT</b>		 <b>FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS</b>	
<b>DOCUMENT # F96000005858</b>			
1. Corporation Name <b>GIBRALTAR DESIGN, INC., ARCHITECTS &amp; ENGINEERS</b>			
Principal Place of Business <b>9102 N MERIDIAN ST #300 INDIANAPOLIS IN 46260</b>		Mailing Address <b>9102 N MERIDIAN ST #300 INDIANAPOLIS IN 46260</b>	
If above addresses are incorrect in any way, line through incorrect information and enter correction below.			
2. New Principal Office Address, If Applicable  Suite, Apt. #, etc.  City & State  Zip      Country		3. New Mailing Office Address, If Applicable  Suite, Apt. #, etc.  City & State  Zip      Country	
4. Date Incorporated or Qualified To Do Business in Florida <b>11/08/1996</b>		5. FEI Number <b>35-1988387</b>	
6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status		Applied For  Not Applicable	
7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)			
1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
DT	<del>KINGHORN, KIRBY</del> <b>HILLARY, JR., DAVID L.</b>	9102 N MERIDIAN ST #300	INDIANAPOLIS IN 46260
D	HENNESSEY, JOHN	3815 RIVER CROSSING PKWY #350	INDIANAPOLIS IN 46260
DC	EVANS, H. DEAN	9102 N. MERIDIAN ST #300	INDIANAPOLIS IN 46260
DP	THOMPSON, JAMES	323 MOODY BLVD	FLAGLER BEACH FL 32136
D	BRAMMER, JAY A	3815 RIVER CROSSING PKWY #350	INDIANAPOLIS IN 46240
S	TODD, HARRY	3815 RIVER CROSSING PKWY #350	INDIANAPOLIS IN 46240
8. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent	
HERRIG, NATALEE A ESQ DUNLAP, MORAN, ROKNICH & GIBSON, P.A. 1819 MAIN ST #700 SARASOTA FL 34236		Name <b>David L. Hillary, Jr.</b> Street Address (P.O. Box Number is Not Acceptable) <del>9102 N. Meridian Street</del> Suite, Apt. #, Etc. <b>322 Moody Blvd.</b> City <b>Flagler Beach</b> State <b>FL</b> Zip Code <b>32136</b>	
10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.			
Signature of Registered Agent 		Date <b>10-15-01</b>	
<b>REGISTERED AGENT MUST SIGN</b>			
11. 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: 		Date <b>10-15-01</b> Daytime Phone # <b>31-580-5717</b>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

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