PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE **Katherine Harris**

Secretary of State

DIVISION OF CORPORATIONS

F96000006132 **DOCUMENT#**

1. Corporation Name

JURIKA & VOYLES, INC.

Principal Place of Business

Mailing Address

1999 HARRISON SLITE 700

SIGNATURE:

1999 HARRISON SHITE 700

FILED

00 NOV 14 PM 1:21

SECRETARY OF STATE. TAREAHASSEE, FEORIDA

* | 188 | 188 | 1886 | 1881 | 1881 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 | 1884 |

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If above a	ddresses are incorrect in any way, line	through incorrect in	nformation and ente	r correction below.	REINS	TATEMENT	2000	
New Principal Office Address, If Applicable New Mailing Office Address, If Applicable					Date Incorporate To Do Busin	orated or Qualified		
Suite, Apt. #, etc. Suite, Apt. #,					5. FEI Number	11,	/22/1996	
City & State City & State			5. FEII		3. FEI NUMBER	04-3330071	Appfied For Not Applicable	
Zip	p Country Zip		Country 6.		**			
7 Names	and Street Addresses of Each Officer	and/or Director (Flo	orida nonprofit corpo	rations must list at le	east 3 directors)			
Title(s)	Name of Officers		Street Address of Each Officer and/or Director		:h	City / State / Zip		
vcs	MILLS, KARL-OLOF		1999 HARRISON STREET,STE #700		₽ 700	OAKLAND CA 94612		
PT	BITTMAN, CHRISTOPHER L		1999 HARRISON STREET, STE #700		OAKLAND CA 94612			
С	JURIKA, WILLIAM K	1999 HARRISON STREET, STE #700			OAKLAND CA 94612			
D G. NEAL RYLAND			399 Boylston Street			Boston, MA 02-116		
			800003487 ,74 82					
						****750.00	****750.00	
8. Name and Address of Current Registered Agent				9. Name and Address of New Registered Agent				
				Name	Name			
	PORATION SERVICE COMPANY HAYS STREET	Street Address (P.O. Box Number is Not Acceptable)						
	AHASSEE FL 32301-2525	Suite, Apt. #, Etc.						
				City		State FL	Zip Code	
Signature of Registered			7	with and accept the		Date		
this reir owed b	that I am an officer or director or the a estatement application, the reason for y the corporation have been paid and application is true and accurate, and r	eceiver or trustee e dissolution has been the names of individ- ny signature shall ha	mpowered to execut eliminated, the cor duals listed on this fo	porate name satisfie orm do not qualify fo iffect as if made und	s the requirements or an exemption un	of section 607.0401 or 617.040	01 F.S. that all tees (