## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

CORPORATION REINSTATEMENT
OCUMENT #

## FLORIDA DEPARTMENT OF STATE **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

F9800005661

STONE BUILDING COMPANY, INC.

02 JUN 18 PM 1:38

SECRETARY OF STATE FALLAHASSEE, FLORIDA

2. Principal Office Address  3.1.2.0 8.TH AVENUE SOUTH  Guite, Apt. #, etc.  Sity & State  BIRMINGHAM, AL		3. Mailing Office Address 3120 8TH AVENUE SOUTH Suite, Apt. #, etc.  City & State BIRMINGHAM, AL		-06/2	800005973538: -06/25/0201052022 *****300.00 *****300.00  4. Date Incorporated or Qualified To Do Business in Florida  10/09/98		
				5. FEI Number	Applied For		
թ 39533	Country LISA	Zip 35333	Country	63-0842065 6.	Not Applicable		

	•	<u> </u>			tor a Certificate
	7. Name and A	Address of Current Regi	stered Agent		
Name		,475° 17° 3			
CT CORPORATION	N SYSTEM	: 😲			
Street Address (P.O. Box Number is N. 1200 SOUTH PIN	ot Acceptable) NE I SLAND RO	DAD			
Suite, Apt. #, Etc.	4		·		
City			State	Zip Code	
PLANTATION		1.2.	FI	20 200	

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.

Registered Agent Date Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)							
PRES	WILLIAM L. STONE	3120 8TH AVENUE SOUTH	BIRMINGHAM, AL 35233				
SEC	JEANE B STONE	3120 8TH AVENUE SOUTH	BIRMINGHAM, AL 35233				
VP	GEORGE H WALKER	3120 8TH AVENUE SOUTH	BIRMINGHAM, AL 35233				
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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 filling 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:

WILLIAM L. STONE, PRESIDENT

JUNE 12, 2002

88,75 - ARSHP

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #