

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPROVED
AND
FILED

05 AUG 23 PM 3:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **G51334**

1. Corporation Name

Horton Enterprises, Inc.
1414 Drake Avenue
Panama City, Florida 32401

2. Principal Office Address

1414 Drake Avenue
Panama City, Florida
Suite, Apt. #, etc.

3. Mailing Office Address

1414 Drake Avenue
Panama City, FL 32401
Suite, Apt. #, etc.

City & State

Panama City, Florida

Zip

32401

Country

BAY

City & State

Panama City, Florida

Zip

32401

Country

BAY

REINSTATEMENT 8-05

**4. Date Incorporated or Qualified
To Do Business in Florida**

7-26-83

5. FEI Number

592329851±

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Curtis C. Horton

Street Address (P.O. Box Number is Not Acceptable)

1414 Drake Avenue

Suite, Apt. #, Etc.

City

Panama City,

State

FL

Zip Code

32401

K. Ecker AUG 23 2005

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

C. C. Horton

Date **8-22-05**

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
P/T	Curtis C. Horton	1414 Drake Avenue	Panama City, Florida 32401
SEC.	Jeanne Horton	1414 Drake Avenue	Panama City, FL 32401

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:

C. C. Horton

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-22-05

Date

850-819-4803

Daytime Phone #

CR2E081 (01/05)