

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H30736

1. Corporation Name

Penn Oil Company, Inc.

2. Principal Office Address - No P.O. Box #

~~13220-160 Houston Avenue~~

Suite, Apt. #, etc. E-10 + V5129

City & State

Live Oak, FL 32060

Zip
32060

Country
USA

3. Mailing Office Address

~~13220-160 Houston Avenue~~

Suite, Apt. #, etc. PO Box 792

City & State

Live Oak, FL 32060

Zip
32060

Country
USA

7. Name and Address of Current Registered Agent

Name
Dale W. Hellemann, Sr.

Street Address (P.O. Box Number is Not Acceptable)
I-10 & US 129N 129N

Suite, Apt. #, Etc.

City
Live Oak, FL

State Zip Code
FL 32060

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 Dale W Hellemann Sr.
REGISTERED AGENT MUST SIGN

Date June 12, 2007

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	Dale W. Hellemn, Sr.	13220-160 Houston Avenue	Hudson, FL 34667
VP	Alexis B. Hellemn	13220-160 Houston Avenue	Hudson, FL 34667
S, T	Lorrie B. Geiger	10000 191st Road	Live Oak, FL 32060

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 contained in Chapter 119, 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: Dale W Hellemann Sr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date June 12, 2007
Daytime Phone #

07 JUN 25 AM 10:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

800105316328
07/03/07--01023--016 **\$43.75

REINSTATEMENT 04-07
CR2E081 (1/07)

4. Date Incorporated or Qualified To Do Business in Florida **11/20/1984**

5. FEI Number
592471416

Applied For
Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒ \$8.75 Additional Fee required for a Certificate of Status

☒ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

26/26