PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FLORIDA DEPARTMENT OF STATE APPLICATION ARD. Sandra B. Mortham FOR FILED Secretary of State REINSTATEMENT **DIVISION OF CORPORATIONS** 1997 NOV 12 HI 9: 33 DOCUMENT # H78893 SECRETARY OF STATE TALLAHASSEE, FLORIDA 1. Corporation Name COASTAL ROOFING AND SHEET METAL, INC. Principal Place of Business Mailing Address 2120 E. BUS 98 2120 E BUS 98 PANAMA CITY FL 32401 PANAMA CITY FL 32405 If above addresses are incorrect in any way, line through incorrect information and enter correction below. 2. New Principal Office Address, If Applicable 3. New Mailing Office Address, If Applicable Date Incorporated or Qualified To Do Business in Florida 10/02/1985 Suite, Apt. #, etc. Suite, Apt. #, etc. 5. FEI Number Applied For 59-2579233 City & State City & State Not Applicable \$8.75 Additional Fee required for a Certificate of Status Zip Country CERTIFICATE OF STATUS DESIRED 7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Name of Officers Street Address of Each Title(s) Officer and/or Director (Do NO1 Use Post Office Box Numbers) City / State / Zip P JONES, JAMES L. JR. 437 W. BALDWIN RD. PANAMA CITY FL S JONES, LU ANNE 437 W. BALDWIN RD. PANAMA CITY FL ď ****165_00 | ****165_00. 8. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent Name JONES, JAMES L. JR. Street Address (P.O. Box Number is Not Acceptable) 437 W. BALDWIN RD. PANAMA CITY FL 32405 Suite, Apt. #, Etc. City State | Zip Code 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 11-10-97 11. This corporation owes or has paid the current year (See other side for information on intangible tax.) Intangible Personal Property tax due June 30. Yes L

12. 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 logal effect as if made under oath.

SIGNATURE:

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NAME AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

//--/3---97 Date 269-9123



2120 East Business Hwy. 98 • Panama City, FL 32401

Jim Jones 904-769-9423 Fax 904-747-0262 State Cert. CCCO23555

11/10/97

Amy Allen Florida Dept. of State Div. of Corporations P.O. Box 6327 Tallahassee, Fl. 32314

Reference: Coastal Roofing and Sheet Metal Inc. H78893

Ms. Allen,

Thank you for your time this morning on the phone. As I stated we never received a corporate report, therefore, we failed to file properly. I am enclosing the usual fee of \$165.00 as you requested. We will make a note to look for next years report so we may file in a timely manner.

Sincerely,

Jim/Jones