PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
97 NOV 19 PM 3:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **H85582**

1. Corporation Name

G.F.S. COMPUTING, INC.

Principal Place of Business	Mailing Address
6975 CHARLES STREET ST. AUGUSTINE FL 32086	6975 CHARLES STREET ST. AUGUSTINE FL 32086

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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
4475 US 1 SOUTH	4475 US 1 SOUTH
Suite, Apt. #, etc. SUITE 102	Suite, Apt. #, etc. SUITE 102
City & State ST. AUGUSTINE FLORIDA	City & State AUGUSTINE FLORIDA
Zip 32086 Country USA	Zip 32086 Country USA

4. Date Incorporated or Qualified To Do Business in Florida: 11/15/1985

5. FEI Number: 59-2605683 ☐ Applied For ☐ Not Applicable

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

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
PD	COOK, JAMES BRIAN	6975 CHARLES STREET	ST. AUGUSTINE FL
STD	COOK, PEGGY RAPHEL	6975 CHARLES STREET	ST. AUGUSTINE FL
VD	BAYLY, CARTER R.	1-B A STREET	ST. AUGUSTINE BCH FL

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-11/20/97--01094--001
****750.00 ****750.00
11-19-97

8. Name and Address of Current Registered Agent

~~TRAYNOR, JOHN MICHAEL~~
~~SUITE 612, ATLANTIC BANK BUILDING~~
~~ST. AUGUSTINE FL 32084~~

9. Name and Address of New Registered Agent

Name: J. B. Cook
Street Address (P.O. Box Number is Not Acceptable): 4475 U.S. South
Suite, Apt. #, Etc.: Suite 101
City: ST. AUGUSTINE State: FL Zip Code: 32086

CR2E040 (8/97)

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: J B Cook Date:
REGISTERED AGENT MUST SIGN

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes ☑ No ☐ (See other side for information on intangible tax.)

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 legal effect as if made under oath.

SIGNATURE: C R Bayly CARTER R BAYLY 10-31-97 904 797 7058
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #