

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H88564

1. Corporation Name

T. HERR, INC.

Principal Place of Business

Mailing Address

16550 FRONT BCH ROAD
PANAMA CITY BEACH FL 32407
US

419 ORCHARD CIRCLE
DOTHAN AL 36305
US

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

12/06/1985

5. FEI Number

59-2621343

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 3	City / State / Zip 4
PD	CARTER, VINCE	409 ORCHARD CIRCLE	DOTHAN AL 36305
VD	CARTER, BECKY	409 ORCHARD CIRCLE	DOTHAN AL 36305

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

HESS, GLENN L.
9108 WEST HIGHWAY 98
PANAMA CITY BEACH FL 32407

Name

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

Suite, Apt. #, Etc.

City

State
FL

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. or 617.0505, F.S.

Signature of
Registered Agent

SIGNATURE

Date

REGISTERED AGENT MUST SIGN

11. 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11-4-03

Date

(334) 702-3465

Daytime Phone #

CR2ED40 (7/03)

T. Herr, Inc.
17 Twin Oaks Lane
Dothan, AL 36303

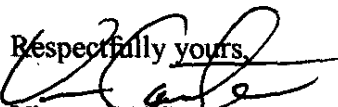
November 4, 2003

Florida Department of State
Glenda E. Hood
Secretary of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314-6327

To Whom It May Concern:

I received this Notice of Administrative Dissolution or Revocation for my Florida corporation, T. Herr, Inc. After calling your office I discovered that I should have received a form at the beginning of the year that should have been filed by May 1, 2003. I did not get this form. We moved earlier in the year and apparently the initial form was not forwarded to my new address. I have enclosed the \$150.00 for my renewal. I hope that you will abate the penalty. Thank you in advance for your consideration.

Respectfully yours,



Vincent N. Carter
President