FILED
02 DEC 13 AM 8:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H97505

1. Corporation Name
Stott Enterprises Incorporated

2. Principal Office Address	3. Mailing Office Address
2555 Estero Blvd	2555 Estero Blvd
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Ft. Myers Beach, Florida	City & State: Ft. Myers Beach, Florida
Zip: 33931 Country: Lee	Zip: 33931 Country: Lee

01-07

4. Date Incorporated or Qualified To Do Business in Florida: February 3, 1986

5. FEI Number: 59-2650984 — Applied For / Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $0.75 Additional Fee Required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: Paul M. Stott

Street Address (P.O. Box Number is Not Acceptable): 14035 Ames Avenue

200009507312
12/13/02--01057--021 **700.00

Suite, Apt. #, Etc.

City: Orlando State: FL Zip Code: 32826

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: Paul M Stott
REGISTERED AGENT MUST SIGN

Date: December 4, 2002

CR2E053 (8/01)

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/D	Paul M. Stott	14035 Ames Avenue	Orlando, Florida 32826
VP/D	Marybeth Stott	252 Crown Oaks Way	Longwood, Florida 32779

12/12/02

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: Paul M Stott
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Paul M. Stott — Date: 12/04/02 — Daytime Phone #: (407) 325-0214