PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR 98 REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

99 APR 30 PM 2:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K11919

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1. Corporation Name

A D J, INC

REINSTATEMENT 98-99

Principal Place of Business	Mailing Address
3818 MANATEE AVE West	3818 MANATEE AVE WEST
BRADENTON, FL 34205	BRADENTON, FL 34205

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
1102 27TH AVE WEST	1102 27TH AVE WEST
Suite, Apt. #, etc	Suite, Apt. #, etc
City & State: BRADENTON, FL	City & State: BRADENTON, FL
Zip: 34205 Country: USA	Zip: 34205 Country: USA

4. Date Incorporated or Qualified To Do Business in Florida: 1/14/82

5. FEI Number: 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
PRES.	DANNIE L. WILSON	714 26TH ST WEST	BRADENTON, FL 34205
V-PRES	THOMAS HENDERSON	1102 27TH AVE WEST	BRADENTON, FL 34205
SECTY	BARBARA WILSON	714 26TH ST WEST	BRADENTON, FL 34205
TREAS	HEATHER HENDERSON	1102 27TH AVE WEST	BRADENTON, FL 34205

8. Name and Address of Current Registered Agent

D TURNER MATTHEWS
2620 MANATEE AVE WEST
BRADENTON, FL 34205

9. Name and Address of New Registered Agent

Name: PETER COEN
Street Address (P.O. Box Number is Not Acceptable): 6302 MANATEE AVE WEST
Suite, Apt. # Etc: SUITE D
City: BRADENTON
State: FL Zip Code: 34209

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: PETER COEN
REGISTERED AGENT MUST SIGN
Date: 4/12/99

11. This corporation owes 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: Thomas Henderson THOMAS HENDERSON 4/12/99 941-747-8875
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E047 (12/98)