PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

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

FILED
99 FEB 11 PM 2:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L43893

1. Corporation Name
JOHN G. RALLS, JR., P.A.

Principal Place of Business
4828 N. DAVIS HWY.
PENSACOLA, FL. 32503

Mailing Address
POB 9414
PENSACOLA, FL.
32513

REINSTATEMENT 90-94

If above addresses are incorrect in any way, line through incorrect information and enter correction below

2. New Principal Office Address, If Applicable: 1320 NINTH AVE.
Suite, Apt. #, etc.
City & State: PENSACOLA FL
Zip: 32503 Country: ESCAMBIA

3. New Mailing Office Address, If Applicable: POB 9414
Suite, Apt. #, etc.
City & State: PENSACOLA FL
Zip: 32513 Country: ESCAMBIA

4. Date Incorporated or Qualified To Do Business in Florida: 11-9-90

5. FEI Number: 59-2996609 | 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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
P	JOHN G. RALLS JR	1320 NINTH AVE.	PENSACOLA, FL. 32503
T	JOHN G. RALLS JR	1320 NINTH AVE.	PENSACOLA, FL 32503
S	JOHN G. RALLS JR	1320 NINTH AVE.	PENSACOLA, FL 32503

500002778085--1
-02/19/99--01065--010
***1922.50 ***1922.50

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent
Name: JOHN G. RALLS JR
Street Address (P.O. Box Number is Not Acceptable): 641 BAYOU BLVD.
Suite, Apt. #, Etc
City: PENSACOLA State: FL Zip Code: 32503

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: [signature] REGISTERED AGENT MUST SIGN Date: 2-5-99

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: [signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-5-99
Date

850-470-0477
Daytime Phone #

CR2E081 (12/98)