

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

10f2

**CORPORATION**  
**REINSTATEMENT**



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

2000-0108

FILED

01 FEB -7 AM 9:22

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

DOCUMENT # 176389

1. Corporation Name

M.G. Morris Enterprises, Inc

2. Principal Office Address

SR 41 Box 14

Suite, Apt. #, etc.

City & State

Ochopee FL

Zip

34141

Country

U.S.A.

3. Mailing Office Address

S.R. 41 Box 14

Suite, Apt. #, etc.

City & State

Ochopee FL

Zip

34141

Country

U.S.A.

4. Date Incorporated or Qualified  
To Do Business in Florida

May 21, 1990

5. FEI Number

65-0202626

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒ \$9.75 Additional Fee required  
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

JAMES E MORRIS

000003743400--8

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

277 STELLA MARIS DR. S.

-02/20/01--01076--013

\*\*\*\*308.75 \*\*\*\*308.75

Suite, Apt. #, Etc.

City

NAPLES

State

FL

Zip Code

34114

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

JAMES E MORRIS

REGISTERED AGENT MUST SIGN

Date 02-05-01

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	MARK G. MORRIS	SR 41 BOX 14	Ochopee, FL 34141
V	JAMES E. MORRIS	277 STELLA MARIS DR S	NAPLES, FL 34114
T/S	MAXINE G. MORRIS	277 STELLA MARIS DR S	NAPLES, FL 34114
			KE

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:

MARK G MORRIS

MARK G MORRIS

02/05/01

Date

305 542 2463

Daytime Phone #

CR2E081 (9/00)

20f2

M.G. Morris Enterprises, Inc.  
State Road 41 - Box 14  
Ochopee, FL 34141

February 5, 2001

Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

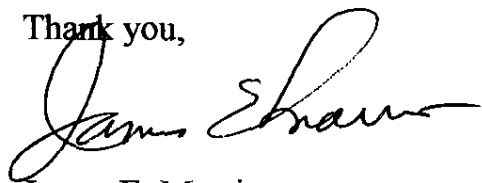
RE: Annual Report

Enclosed is the completed corporation reinstatement form for M.G. Morris Enterprises, Inc.

We first became aware our year 2000 Annual Corporate Report was not filed when searching our files for a copy. Further investigating by internet showed our report had not been filed by our CPA, Rita Gust with Cabot Business Services, Inc., who was handling this for us annually. We wrote the check and gave it to her but filing was never done and the check has disappeared. She has now been diagnosed with Alzheimer's disease and explains our problem with this as well as several other areas.

In talking to your office we were advised by Ms. Sprather to write a letter explaining the situation and to enclose a check for \$300 plus 8.75 for a certified copy to bring us current to 2001.

Thank you,



James E. Morris  
For M.G. Morris Enterprises, Inc.