

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

2007 AUG 16 AM 8:33

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N02000004275

1. Corporation Name

PRIDE OF PALATKA, INC.

W070000236108

2. Principal Office Address - No P.O. Box #  
201 N.2nd Street

3. Mailing Office Address  
212 HUSSON AVENUE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

PALATKA, FLORIDA

City & State

PALATKA, FLORIDA

Zip  
32177

Country  
PUTNAM

Zip  
32177

Country  
PUTNAM

REINSTATEMENT 05-07

CR2E081 (1/07)

4. Date Incorporated or Qualified  
To Do Business in Florida 06/04/2002

5. FEI Number  
300085872

Applied For  
Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ \$8.75 Additional Fee required  
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name  
ALLEN J. NORTON

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

Suite, Apt. #, Etc.

City  
PALATKA, FLA

State  
FL

Zip Code  
32177

☒ The reinstatement fee is imposed, except in  
circumstances which the entity did not receive  
the prior notices. By checking this box, you  
are certifying the prior notices were not  
received and requesting the reinstatement  
fee be waived.

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08/28/07--0000--025 \*\*183.75

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

*Allen J. Norton*

REGISTERED AGENT MUST SIGN

Date 7/23/07

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

| Titles | Name of<br>Officers and/or Directors | Street Address of Each<br>Officer and/or Director | City / State / Zip  |
|--------|--------------------------------------|---|---------------------|
| D      | MARY LAWSON BROWN                    | 109 N.9th St                                      | PALATKA, FL. 32177  |
| D      | JOHN R. HENLEY                       | PO BOX 374  | BOSTWICK, FL. 32007 |
| D      | CONSTANTINE FOLTIS                   | 136 CEDAR CREEK RD.                               | PALATKA, FL. 32177  |
| D      | ALLEN J. NORTON                      | 212 HUSSON AVENUE                                 | PALATKA, FL. 32177  |
| D      | KEN VENABLES                         | PO BOX 892  | PALATKA, FL. 32178  |
| D      | KAREN VENABLES                       | P.O BOX 892                                       | PALATKA, FL. 32178  |

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 contained in Chapter 119, 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:

*Mary Lawson Brown*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

07/24/07

Date

(386) 325-4543

Daytime Phone #

8/21/07