PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

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

FILED
02 SEP 12 AM 10:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N14745

1. Corporation Name

NASSAU HUMANE SOCIETY, INC.

000007822920--0
-09/18/02--01032--019
****122.50 ****122.50

2. Principal Office Address	**3.** Mailing Office Address
2798 E. State Rd 200	2798 E. State Rd 200
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Yulee, FL	City & State: Yulee, FL
Zip: 32097 Country: USA	Zip: 32097 Country: USA

4. Date Incorporated or Qualified To Do Business in Florida: 05/06/1986

5. FEI Number: 59-2667141 ☐ 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: Wesley R. Poole, Esquire

Street Address (P.O. Box Number is Not Acceptable): 303 Centre Street

Suite, Apt. #, Etc.: Suite 200, Allan Building

City: Fernandina Beach State: FL Zip Code: 32034

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: Wesley R Poole Date: 9-10-02
REGISTERED AGENT MUST SIGN

CR2E081 (9/01)

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	Stephen J. Borusovic	24 Wax Myrtle Road	Amelia Island, FL 32034
V/D	Trent Maddox	1601 Gerbing Rd #250	Fernandina Beach, FL 32034
T/D	Janice Thrift	2129 Natures Gate Ct N	Fernandina Beach, FL 32034
D	Ron Kurtz	1619 Regatta Drive	Amelia Island, FL 32034
D	Houston Deaver	15 South Fletcher Ave. #303	Fernandina Beach, FL 32034
M/D	Terry Marques	2128 Amelia Road	Fernandina Beach, FL 32034

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: Terry E. Marques 09/10/2002 904-225-0006
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #