

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

2011 JUL 26 AM 10:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #N18737

1. Corporation Name

The Fence Club, Inc.

REINSTATEMENT 01-11

04/13/11--01035--004 **236.25
400201715894

CR2E081 (11/10)

2. Principal Office Address - No P.O. Box #

1116 Richview Rd

3. Mailing Office Address

4449 Westover Dr

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Tallahassee, FL

City & State

Tallahassee, FL

Zip

32301

Country

USA

Zip

32303

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

1/13/87

5. FEI Number

59-2767938

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

Jacqueline P. Bryant

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

1116 Richview Rd

Suite, Apt. #, Etc.

City

Tallahassee, FL

State

FL

Zip Code

32301

400201715894

07/26/11--01013--002 **621.25

5/2/26

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

Jacqueline P. Bryant

REGISTERED AGENT MUST SIGN

Date 4/6/11

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	Jacqueline P. Bryant	1116 Richview Rd	Tallahassee, FL 32301
V	Glen S. Wade <i>BSW</i>	P O Box 34	Crawfordville, FL 32326
S	Annette Pompey <i>AP</i>	4449 Westover Dr	Tallahassee, FL 32303
T	Mary Conway <i>MC</i>	410 Thomas St	Quincy, FL 32351
A T	Barbara Beverly <i>BB</i>	1505 W. Lake Bradford Rd	Tallahassee, FL 32310
S A A	Leroy Beverly <i>LB</i>	1505 W. Lake Bradford Rd	Tallahassee, FL 32310

10. E-mail Address: adamh747@yahoo.com (Annette Pompey)

(To be used for future annual report notification)

11. 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., and that all fees owed by the corporation have been paid. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

SIGNATURE:

Jacqueline P. Bryant

JACQUELINE P. BRYANT

Date

4/6/11

Daytime Phone #

850-878-5834

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR