PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1 of 2

CORPORATION REINSTATEMENT

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

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 MAR 17 PM 12:50

DOCUMENT # N94000000957

1. Corporation Name
National Retirees Council, INC

REINSTATEMENT 01-04

2. Principal Office Address	**3.** Mailing Office Address
1210 Lane Avenue, N.	1210 Lane Avenue, North
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Jacksonville, Florida	City & State: Jacksonville
Zip: 32254 Country: USA.	Zip: 32254 Country: USA.

4. Date Incorporated or Qualified To Do Business in Florida

5. FEI Number: 593215210 ☐ 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: Preston Drummer

100030933731
03/23/04--01070--035 **245.00

Street Address (P.O. Box Number is Not Acceptable): 6713 Champlain Road

Suite, Apt. #, Etc.:

City: Jacksonville | State: FL | Zip Code: 32208-2416

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: Preston Drummer
REGISTERED AGENT MUST SIGN

Date: 3-17-04

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
President	Robert E. McCort	9516 Waterford Road	Jacksonville, Florida 32257
Secretary Treasurer	Preston Drummer	6713 Champlain Road	Jacksonville, FL 32208-2416
V.P.	Charles Harper	P.O. Box 55	Middleburg, FL 32068
D	Ernest Hartless	605 E. 64th Street	Jacksonville, FL 32208
D	Andy Bell	1300 Riverplace Blv., Suite 500	Jacksonville, FL 32254
D	J.V. Snowden	3110 Stanton Road	Jacksonville, FL 32254

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: Preston Drummer 3/17/04 904-764-5719
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

March 17, 2004

Division of Corporations
State of Florida

Re: Document # N94000000857

To Whom It May Concern:

Please be advised that we did not receive the 1st or 2nd notice for the year 2001.

Secretary-Treasurer
National Retirees Council, Inc.