

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
03 NOV 14 PM 12:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P00000024493

1. Corporation Name

J.D. GILMORE, INC.

100024705801  
11/14/03--01042--010 \*\*150.00

2. Principal Office Address

6063 17TH STREET EAST

Suite, Apt. #, etc.

City & State

BRADENTON, FL

Zip

34203

Country

USA

3. Mailing Office Address

PO BOX 115

Suite, Apt. #, etc.

City & State

ONECO, FL

Zip

34264

Country

USA

**REINSTATEMENT**

4. Date Incorporated or Qualified  
To Do Business in Florida

03/03/2000

5. FEI Number

65-100872

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

J. D. GILMORE

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

6063 17TH ST. EAST

Suite, Apt. #, Etc.

City

BRADENTON

State  
FL

Zip Code  
34203

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

Date 11/07/2003

REGISTERED AGENT MUST SIGN

**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/V	J.D. GILMORE	6063 17TH ST. EAST	BRADENTON, FL 34203

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:

*J.D. Gilmore President*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/07/2003 941-753-7830

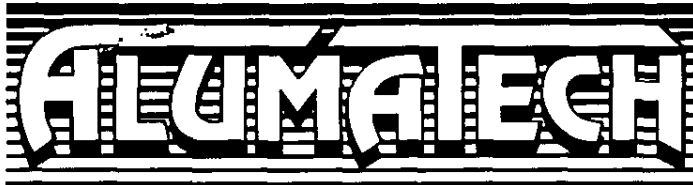
Date

Daytime Phone #

CR2E081 (10/02)

TR

J.D. Gilmore, Inc. DBA



*Manufacturers and Refinishers of Outdoor Furniture*

November 7, 2003

Florida Department of State  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

RE: Corporation Reinstatement - P0000024493

To Whom It May Concern:

Enclosed is a check for \$150.00 and a signed corporation reinstatement form.

I did not receive the 2003 UBR or any notices relating to corporate fees due. As you can see my reinstatement has all new addresses listed. Your abatement of the reinstatement fee would greatly be appreciated.

Regards,

A handwritten signature in black ink, appearing to read "J.D. Gil", is written over the word "Regards,".

J.D. Gilmore, Pres.