

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

AND  
FILED

03 MAY -1 AM 5:21

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P00000060682

1. Corporation Name

Jeff Bruner Inc.

*JB*

**REINSTATEMENT 01-03**

400017915044  
05/02/03--01111--007 \*\*1058.75

2. Principal Office Address

5041 INDIAN BLUFF DR

3. Mailing Office Address

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Youngstown FLA.

City & State

SAME

Zip

Country

32466

US

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

June 22, 2000

5. FEI Number

59-3655326

Applied For

Not Applicable

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

7. Name and Address of Current Registered Agent

Name

Jeff Bruner

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

5041 INDIAN BLUFF DR.

Suite, Apt. #, Etc.

City

Youngstown

State

FL

Zip Code

32466

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

*Jeff Bruner*  
REGISTERED AGENT MUST SIGN

Date April 29, 03

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
Pres.	Jeff Bruner	5041 INDIAN BLUFF DR	Youngstown FL 32466
Sec.	DAVID GRIFFITH	SAME AS ABOVE	SAME AS ABOVE
Treas.	MARK VANDERLOFSTRE	SAME AS ABOVE	SAME AS ABOVE

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:

*Jeff Bruner*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 29, 03

Date

850 814-6434  
Daytime Phone #

CR2E081 (10/02)