

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 FEB -9 PM 2:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 900000065364

1. Corporation Name

Seminole Tree, Inc.

REINSTATEMENT 02-04

200028408072

02/09/04--01035--016 **450.00

2. Principal Office Address

5185 S. Tropical Trail

3. Mailing Office Address

5185 S. Tropical Tr.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Merritt Island, FL

City & State

Merritt Island, FL

Zip

32952

Country

usa

Zip

32952

Country

usa

**4. Date Incorporated or Qualified
To Do Business in Florida**

07/05/2000

5. FEI Number

593654724

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

James McNab Jr.

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

5185 S. Tropical Trail

Suite, Apt. #, Etc.

City

Merritt Island

State

FL

Zip Code

32952

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

James McNab Jr.

Date Jan. 14, 2004

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
Pres.	Edward Schatz	4601 North State Street	Bunnell, FL 32110
VP	James McNab Jr.	5185 S. Tropical Trail	Merritt Island, FL 32952
Dir	Wade Hammond	5185 S. Tropical Trail	Merritt Island, FL 32952

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:

James McNab Jr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan. 14, 2004

Date

321-863-3363

Daytime Phone #

CR2E081 (10/02)

January 14, 2004

Department of State
Division of Corporations
Corporate Filings
P.O. Box 6327
Tallahassee, FL 32314

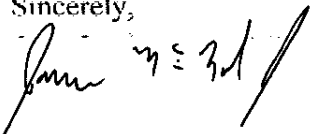
To Whom It May Concern:

I am writing this letter to have the reinstatement fee for late corporate filing waived. I am the registered agent of Seminole Tree, Inc. and we have not received a bill since 2002. I moved and never sent a change of address to the state. My new corporate address is as follows:

Seminole Tree, Inc.
5185 S. Tropical Trail
Merritt Island, FL 32952

Please find a check enclosed for \$450 to reinstate Seminole Tree, Inc. Thank you in advance for your assistance with this matter.

Sincerely,

A handwritten signature in black ink, appearing to read "James McNab Jr.", with a large, stylized flourish at the end.

James McNab Jr.
Seminole Tree, Inc.