

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION



FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

FOR
REINSTATEMENT

FILED

02 OCT 25 PM 12:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000070650

1. Corporation Name

HICKEY & HICKEY TRUCKING, INC.

Principal Place of Business

Mailing Address

25 GRAY ROAD
QUINCY FL 32351

25 GRAY ROAD
QUINCY FL 32351

Rt. 3 Box 27262
Lake City, FL 32025

Rt. 3 Box 27262
Lake City, FL
32025



If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

09/01/2000

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

59-3661449

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

| Title(s) 1 | Name of Officers and/or Directors 2 | Street Address of Each Officer and/or Director 3 | City / State / Zip 4 |
|---------------|---|--|-------------------------|
| D | HICKEY, MARGIE P | 25 GRAY RD | QUINCY FL 32351 |
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10/30

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

HICKEY, MARGIE

25 GRAY ROAD Rt. 3 Box 27262
QUINCY FL 32351 Lake City, FL
32025

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of
Registered Agent

SIGNATURE REQUIRED
MARGIE P. Hickey
REGISTERED AGENT MUST SIGN

Date

Oct 21, 2002

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., 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:

SIGNATURE REQUIRED
MARGIE P. Hickey
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Oct. 21, 2002

Date

Daytime Phone #

386-9161-940

CR2E040 (8/02)

Hickey & Hickey Trucking, Inc.

Rt. 3 Box 27262
Lake City, Florida 32025

Phone 386-961-9410

October 21, 2002

Florida Department of State
Jim Smith
Secretary of State
Division of Corporations

Dear Sir/Madam

In December of 2001 we moved our home and office to Lake City, Florida and did not receive our UBR notices as you did not have our current address. Please note that I have included my penalty fees and wish to continue to do business as a corporation in the state of Florida in the future.

Sincerely,



Margie Hickey
President Hickey & Hickey Trucking, Inc.