

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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| APPLICATION FOR   |                                   | FLORIDA DEPARTMENT OF STATE<br>Katherine Harris,<br>Secretary of State<br>DIVISION OF CORPORATIONS                |                         |
|---|-----------------------------------|---|-------------------------|
| DOCUMENT #  |                                   | P00000070823  |                         |
| 1. Corporation Name<br>DALE HOBBS PAINTING, INC.  |                                   |   |                         |
| Principal Place of Business<br>426 ORLANDO BLVD.<br>PORT CHARLOTTE FL 33954   |                                   | Mailing Address<br>426 ORLANDO BLVD.<br>PORT CHARLOTTE FL 33954   |                         |
| 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  |                         |
| Suite, Apt. #, etc.   |                                   | Suite, Apt. #, etc.   |                         |
| City & State  |                                   | City & State  |                         |
| Zip   | Country                           | Zip   | Country                 |
| 4. Date Incorporated or Qualified To Do Business in Florida   |                                   | 07/21/2000  |                         |
| 5. FEI Number   |                                   | Applied For<br>Not Applicable   |                         |
| 65-1025047  |                                   |   |                         |
| 6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>   |                                   | \$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)  | Name of Officers and/or Directors | Street Address of Each Officer and/or Director  | City / State / Zip      |
| 1   | 2                                 | 3   | 4                       |
| D   | HOBBS, DALE                       | 426 ORLANDO BLVD.   | PORT CHARLOTTE FL 33954 |
| 800004749208--9<br>-01/03/02-01049--025<br>*****150.00 *****150.00  |                                   |   |                         |
| OUBR TS   |                                   |   |                         |
| 8. Name and Address of Current Registered Agent   |                                   | 9. Name and Address of New Registered Agent   |                         |
| HOBBS, DALE<br>426 ORLANDO BLVD.<br>PORT CHARLOTTE FL 33954   |                                   | Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>Suite, Apt. #, Etc.<br>City<br>State<br>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.   |                                   |   |                         |
| Signature of Registered Agent   |                                   | Date  |                         |
| SIGNATURE REQUIRED  |                                   |   |                         |
| 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:  |                                   | Date Daytime Phone #  |                         |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  |                                   |   |                         |

CR2040 (8/01)

Dale Hobbs Painting, Inc.  
426 Orlando Blvd.  
Port Charlotte, FL 33954


October 24, 2001

To Whom It May Concern,

Please accept the 2001 Uniform Business Report enclosed as timely filed, along with our check for \$150.00.

This is our first year being incorporated. We never received the form in the year 2001.

Thank you,

  
Dale Hobbs  
President