


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

Page 1 of 2


CORPORATION				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P00000078244					
1. Corporation Name Jennings Citrus Trucking, Inc.					
2. Principal Office Address 11765 N. U.S. Hwy. 301 Suite, Apt. #, etc.			3. Mailing Office Address P. O. Box 52 Suite, Apt. #, etc.		
City & State Oxford, FL			City & State Wildwood, FL		
Zip	Country USA	Zip 34785	Country USA		

FILED
02 MAR 20 AM 10:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

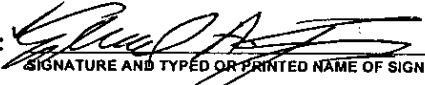
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****300.00 ****300.00

4. Date Incorporated or Qualified To Do Business in Florida 8/17/00	
5. FEI Number 59-3667719	Applied For Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

7. Name and Address of Current Registered Agent		
Name Archie O. Lowry, Jr.		
Street Address (P.O. Box Number is Not Acceptable) 308 E. Fifth Ave.		
Suite, Apt. #, Etc.		
City Mt. Dora	State FL	Zip Code 32757

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 3/5/02
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	Edward A. Jennings	2819 CR 415	Lake Panasoffkee, FL 33538
VP/S/T	Deborah D. Jennings	2819 CR 415	Lake Panasoffkee, FL 33538

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:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Edward A. Jennings Date: 3/12/02 Daytime Phone #: 352-748-2235

CR2E081 (9/01)

page 2012

March , 2002

Attn: Reinstatements
Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Re: **Jennings Citrus Trucking, Inc.**
Reinstatement

Dear Sir or Madam:

Please be advised that I am and have been the President of Jennings Citrus Trucking, Inc. since its incorporation on August 17, 2000.

The physical location of Jennings Citrus Trucking, Inc. is Hwy. 301, CR 466, Oxford, FL, however, I have not received the annual report or the Uniform Business Report from the State of Florida. The business is an ongoing business and I have provided a new mailing address for the purpose of future correspondence from the State of Florida.

By this letter, I am requesting a waiver of the \$600.00 reinstatement fee and have enclosed \$300.00 to bring the corporation current for 2001 and 2002.

Thank you for your assistance and cooperation in this matter.

Very truly yours,



Edward A. Jennings
President

EAJ
Enclosures

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