

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 MAR -1 PM 1:24

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # P000000108989

1. Corporation Name

CHARLES MARTIN HOLLAND INC.

2. Principal Office Address 32968

6566 4TH LANE, VERO BEACH

3. Mailing Office Address

SAME

Suite, Apt. #, etc.

N/A

Suite, Apt. #, etc.

N/A

City & State

VERO BEACH, FL.

City & State

SAME

Zip

32968

Country

USA

Zip

SAME

Country

SAME

4. Date Incorporated or Qualified
To Do Business in Florida

1/1/2001

5. FEI Number

651069831

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

CHARLES M. HOLLAND

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

6566 4TH LANE

Suite, Apt. #, Etc.

N/A

City

VERO BEACH

State

FL

Zip Code

32968

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

Charles M. Holland
REGISTERED AGENT MUST SIGN

Date

2/14/04

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
ALL	CHARLES M. HOLLAND	6566 4 TH LANE	VERO BEACH, FL.
	PS/D/T/M		

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:

Charles M. Holland CHARLES M. HOLLAND

Date

2/14/04

Daytime Phone #

772-563-9342

CR2E081 (01/04)