

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

2001 UBR

DOCUMENT # P00000112452

1. Corporation Name  
CONTRACTORS HURRICANE PROTECTION, INC.

Principal Place of Business Mailing Address

8537 MUSTANG DR.  
NAPLES FL 34113

8537 MUSTANG DR.  
NAPLES FL 34113

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

2. New Principal Office Address, If Applicable  
751 Lambton Lane  
Suite, Apt. #, etc.  
City & State  
Naples, FL.  
Zip 34104 Country Collier

3. New Mailing Office Address, If Applicable  
Suite, Apt. #, etc.  
City & State  
Zip Country

4. Date Incorporated or Qualified To Do Business in Florida 12/07/2000

5. FEI Number 05-1050176 Applied For Not Applicable

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) | Name of Officers and/or Directors | Street Address of Each Officer and/or Director | City / State / Zip   |
|----------|-----------------------------------|--|--|
| D        | DULANEY, JOHN R                   | 8537 MUSTANG DR.                               | NAPLES FL 34113  |
|          | Dulaney, John R.                  | 751 Lambton Lane                               | Naples, FL. 34104  |
|          |                                   |  | 700004719077-5<br>-12/11/01-01072-010<br>****150.00 ****150.00 |
|          |                                   |  | LS   |

8. Name and Address of Current Registered Agent

DULANEY, JOHN R  
8537 MUSTANG DR.  
NAPLES FL 34113

9. Name and Address of New Registered Agent

Name John R. Dulaney  
Street Address (P.O. Box Number is Not Acceptable)  
751 Lambton Lane  
Suite, Apt. #, Etc.  
City Naples State FL Zip Code 34104

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 [Signature] Date 11/13/2001  
REGISTERED AGENT MUST SIGN

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] John R. Dulaney, President 11/13/01 241-530-7575  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #



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## Contractors Hurricane Protection, Inc.

October 12, 2001

Florida Department of State  
Division of Corporations  
Annual Report/Reinstatement Section  
P.O. Box 6327  
Tallahassee, FL 32314-6327

Attention: To Whom It May Concern

On December 7, 2000 my company, Contractors Hurricane Protection, Inc., was incorporated as a Florida Corporation by document number P00000112452 (copy attached). Immediately following we applied for and received our Federal Employer Identification Number 65-1056176.

My company was formed and incorporated in the State of Florida in preparation of the Florida Building Code changes proposed to take effect on January 1, 2001. Now the effective date for the 2001 Unified Florida Building Codes is January 1, 2001.

To date, Contractors Hurricane Protection, Inc. has not made any money but I have invested numerous resources in preparation to be in a position to provide a valuable resource and service to the many new home builders throughout Southwest Florida in dealing with the code changes.

Today I received a Notice of Administrative Dissolution or Revocation (copy attached). When I immediately called the phone number specified (850) 245-6059 for help, I was instructed to write this letter requesting your help and assistance. I now understand from this conversation an Annual Report/Uniform Business Report needs to be filed with the State of Florida - Division of Corporations by a certain time each year.

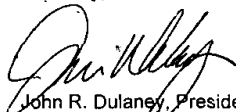
I was not aware of this requirement and I never received anything from the Division of Corporations advising me of your filing requirements and annual fee of \$150.00. When I moved the business earlier this year from 8537 Mustang Dr. Naples, FL 34113 to the current new principal place of business address of 751 Lambton Lane, Naples, FL 34104, the new address was registered with the Division of Corporations as reflected by the enclosed address label the Division of Corporations. Maybe this moving event is in fact the problem with the correct address information for US postal service and the mail delivery.

I am requesting your consideration in regards to this very important matter. I am ready, willing and able to file the required Annual Report, immediately upon receipt of same reporting form along with the required fee of \$150.00. As a small business without the ability to commence our business plan and produce income as of this date, I cannot afford the \$750.00 to reinstate the business.

Please consider again my unawareness of your annual filing requirements and the fact I did not receive anything advising me of your filing requirements. Can you help me? Please advise me by phone, fax or email and let me now to proceed.

Thank you in advance for your help and consideration.

Sincerely,

  
John R. Dulaney, President  
Contractors Hurricane Protection, Inc.

Freedom Square  
12693 Tamiami Trail East - PMB# 218  
Naples, FL 34113  
Phone: (941) 530-7575

Fax: (941) 775-2784  
Cell Phone: (941) 450-4034  
e-mail - [jodulaney@mindspring.com](mailto:jodulaney@mindspring.com)