

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

10f2

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 SEP 30 AM 9:47

DOCUMENT # POI 000008424

1. Corporation Name

JERALD M. HUTCHER CORP

REINSTATEMENT 03-05

2. Principal Office Address

6 NE 45ST

Suite, Apt. #, etc.

3. Mailing Office Address

6 NE 45ST

Suite, Apt. #, etc.

CR2E081 (8/05)

City & State

Pompano Bch FL

City & State

Pompano Bch FL

Zip

33064

Country

Broward

Zip

33064

Country

Broward

4. Date Incorporated or Qualified
To Do Business in Florida

01/22/01

5. FEI Number

65-1079763

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

JERALD M. HUTCHER

100860206131

10/04/05--01027--010 **450.00

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

6 NE 45ST

Suite, Apt. #, Etc.

City

Pompano Bch

State

FL

Zip Code

33064

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

JERALD M. HUTCHER

REGISTERED AGENT MUST SIGN

Date 9/26/05

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 | JERALD M. HUTCHER | 9546 Bryson City Rd | Franklin NC 28734 |
| V | JOY HUTCHER | 9546 Bryson City Rd | Franklin NC 28734 |
| Sec. | JOANNA ASKIN | 6 NE 45 ST | Pompano Bch FL 33064 |
| | | | |
| | | | |
| | | | |

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:

JERALD M. HUTCHER

JERALD M. HUTCHER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/26/05

Date

828-342-5600

Daytime Phone #

20f2

9/26/2005

To whom it may concern:

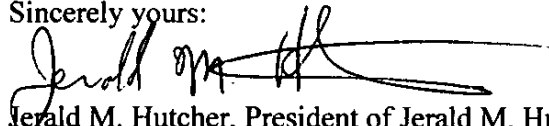
This letter is inform you that we never received notification of the expiration of our corporation.

Perhaps the Hurricanes of last season delayed our notification. I have no idea why I did not receive notification for the previous year.

It is imperative that my corporation be maintained and I would never have intentionally ignored a notice.

Enclosed please find a completed reinstatement for along with a check for \$450. Thank you for your help in this matter.

Sincerely yours:

A handwritten signature in black ink, appearing to read "Jerald M. Hutcher", with a long horizontal flourish extending to the right.

Jerald M. Hutcher, President of Jerald M. Hutcher Corp #P01000008424