

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPROVED
FILED

14 MAR 12 AM 8:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P01000028912

1. Corporation Name

Vance Brothers, Inc.

2. Principal Office Address - No P.O. Box #

4540 Goeble Road

Suite, Apt. #, etc.

3. Mailing Office Address

4540 Goeble Road

Suite, Apt. #, etc.

City & State

Fort Myers, FL

Zip

33905

Country

USA

City & State

Fort Myers, FL

Zip

33905

Country

USA

CR2E081 (11/10)

4. Date Incorporated or Qualified
To Do Business in Florida

3/21/2001

5. FEI Number

65-1088112

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

Terry K. Vance

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

4540 Goeble Road

Suite, Apt. #, Etc.

City

Fort Myers,

State

FL

Zip Code

33905

700257741787
03/12/14--01017--026 **350.00

700257741787
03/12/14--01017--025 **1000.00

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

Terry K. Vance

REGISTERED AGENT MUST SIGN

Date 3/3/2014

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	Terry K. Vance	4540 Goeble Road	Fort Myers, FL 33905
V	Jonathan D. Vance	3418 72nd Street W.	Lehigh Acres, FL 33971
S	Karen C. Vance	4540 Goeble Road	Fort Myers, FL 33905

REINSTATEMENT - 2010 - 2014

10. E-mail Address: Vancebrothersinc01@yahoo.com

(To be used for future annual report notification)

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., and that all fees owed by the corporation have been paid. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

SIGNATURE:

Terry K. Vance
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/3/2014

239-229-4231

Date

Daytime Phone #