PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.						
	PLICATION FOR ISTATEM DV	FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State DIVISION OF CORPORATIONS		t h State	FILED	
DOCUMENT # P0100034609				02 NOV -5 AM 9: 50		
1. Corporation Name J.E. PENLAND, INC.				SECRETARY OF STATE TALLAMASSEE FLORIDA		
Principal Place of Business Mailing Address						
5475 SAD	DLEBROOK WAY CHAPEL FL 33543	Mailing Address 5475 SADDLEBROOK WAY WESLEY CHAPEL FL 33543				
If above addresses are incorrect in any way, line through incorrect information and enter correction below.						
2. New Pr	incipal Office Address, If Applicable	3. New Mailing Office Address, If Applicable			Date Incorporated or Qualified To Do Business in Florida 04/02/2001	
Suite, Apt.	<u> </u>	Suite, Apt. #, etc.		· · · · · · · · · · · · · · · · · · ·	5. FEI Number 65-1096749 Applied For Not Applied For	
City & State Zip Country		City & State			6	
	Country	Zip	Coun	,	CERTIFICATE OF STATUS DESIRED S8.75 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 (c) Name of Officers Street Address of Each						
PVST	2 and/or Directors	- 3		Officer and/or Director	City / State / Zip	
PVOI	PENLAND, JULIA		5475 SADDLE	SHOOK WAY	WESLEY CHAPEL FL 33543	
				**	100008794511 11/05/0201012002 **150.00	
				11.0		
	· · · · · · · · · · · · · · · · · · ·			,		
	8. Name and Address of Current R	egistered Ager	nt ·		9. Name and Address of New Registered Agent	
Name				Name		
PENLAND, JULIA E 5475 SADDLEBROOK WAY				Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc.		
WESLI	EY CHAPEL FL 33543	Suite, Apt. #, Et		Suite, Apt. #, Etc.	i i	
				City State Zip Code		
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. or 617.0505, F.S.						
$h \in \mathcal{L}$						
Signature of Registered Agent ATATION BED Date 10/25/02						
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 fisted 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 Date Date Date Daytime Phone #						

SMALL BUSINESS ACCOUNTING SERVICES

23110 SR 54, #148 Lutz, FL 33549 (813) 294-3659 (813) 996-9587 FAX Email: wendy@sbaservices.us

October 30, 2002

Division of Corporations 409 East Gaines Street Tallahassee, Florida 32399

Re: 2002 UBR for J.E.PENLAND, INC

Florida Document No. P01000034609

To Whom It May Concern:

It has come to our attention that the above-referenced Corporation did not file the 2002 Uniform Business Report. They believed that their Attorney had already filed this however it was not. Enclosed with this letter and the reinstatement form is a check for the originally filing fee of \$150.00. We would like to ask that the late filing fees for our client be waived under these circumstances. If you have any questions, please contact me at (813) 294-3659. Thank you for your consideration.

Sincerely,

Wendy Corlett

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