

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 MAY 13 PM 2:09

DOCUMENT # P01000057213

1. Corporation Name

SANFORD SMITHSON, INC.

500036994645
05/21/04--01059--015 **300.00

REINSTATEMENT 03-04

2. Principal Office Address

3. Mailing Office Address

2704 CHURCH HILL RD.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

WOODSTOCK UT

Zip

Country

Zip

Country

05091

WOODSOR

4. Date Incorporated or Qualified
To Do Business in Florida

6-08-2001

5. FEI Number

59-3723698

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

BENJAMIN SANFORD

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

330 Dog Track Rd

Suite, Apt. #, Etc.

City

LOWWOOD

State

FL

Zip Code

32750

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

Benjamin Sanford
REGISTERED AGENT MUST SIGN

Date 5-13-04

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
<u>Pres</u>	<u>Kelly Smithson</u>	<u>2704 Church Hill Rd.</u>	<u>Woodstock UT 05091</u>
<u>VP</u>	<u>BENJAMIN SANFORD</u>	<u>2704 Church Hill Rd.</u>	<u>Woodstock UT 05091</u>

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:

Benjamin Sanford 5-13-04 802-457-9812
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

S & S Fence and Rail, Inc.

Department of State Division of Corporate Licensing
409 East Gaines Street
Tallahassee, Florida

Reference Number: PO1000057213

5/13/04

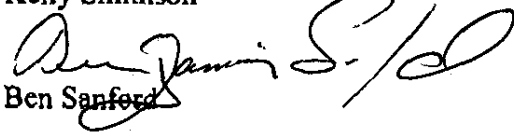
To Whom this May Concern

We at S & S Fence and Rail, Inc. did not receive the filing notice for the years 2003 or 2004. We changed our address and no mail was forwarded. For any further correspondence please note our current address: 2704 Church Hill Road, Woodstock, Vermont 05091. Thanking you in advance for your prompt attention regarding this matter.

Sincerely,



Kelly Smithson



Ben Sanford

Providing Service Beyond Expectations

2704 Church Hill Road
Woodstock, VT 05091
Phone: 802-457-9812, Fax: 802-457-3265