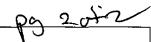
PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. P3 10 F

PLEAGE KENL	ALLINGIRUCI	IONS BEFORE		MO THIS FURIMIN ,	J	
CORPORATION REINSTATEMENT	Secreta	TMENT OF STATE by of State corporations	03	FILED DEC 17 AN 9 42		
DOCUMENT # 901 500072062			}			
4 Consortion Name			SECR	NETARY OF STATE MINASSEE, FLORIDA		
1. Corporation Name Bick Sextles, P.A.			TALL/	AHASSEE, FLURIDA		
Desce DEALIES (111)						
Principal Office Address 3. Mailing Office Address		ess				
134-B E. Venice Ave. So		ine		200025556942 12/17/0301020032 **150.00		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		1			
Suite B			4. Date Incorporated or Qualified			
City & State			To Do Business in Florida 1 2002			
Verice FL		-	5. FEI Number	156460	Applied For	
Zip Country	Zip	Country	6.		Not Applicable	
342 85 Sarasota			CERTIFICATE	OF STATUS DESIRED [\$8.75 A	dditional Feerequired Certificate of Status	
	7. Name and	Address of Current Registe	red Agent			
Name ()		an Paul Set		1		
Buck Settle		1/2 PGU 1 Jet	ties, 0/+	·)		
Street Address (P.O. Box Number is	Not Acceptable) Creek Q.					
Suite, Apt. #, Etc.	Creat 19.7					
City Englewood State Zip Code FL 3423						
8. I, being appointed the registered agent of the al	bove named corporation, am	familiar with and accept the c	obligations of section	1 607.0505 or 617.0503, F.S.		
Signature of				(2/1)		
Registered Agent RECASTERED AGENT MUST SIGN				Date 2/11 03		
		 _	===================================			
Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at lease. Titles						
Titles Officers and/or Directors Officer and/or Directors				City / State / Z	<u> ip</u>	
President Willian Paul Settles, Jr. 1393 Forked creek D			٤	Endewood, FC	34223	
	•					
						
				}		
	n 4 5 5 6			5	ll li	
						
				i nara	}	
				-		
			<u></u>			
10. I certify that I am an officer or director or the recthis reinstatement application, the reason for di owed by the corporation have been paid and the	ssolution has been eliminated ie names of individuals listed	 the corporate name satisfies on this form do not qualify for 	s the requirements of an exemption under	of section 607.0401 or 617.0401,	F.S., that all fees	
on this application is true and accurate, and my	signature shall have the san	ne legal effect as if made unde	er oath,		}	
(2/2/1)	/ //		, I.	1.0	0.00	
SIGNATURE: SIGNATURE AND TYPED OR F	PRINTED NAME OF SIGNING OF	FICER OR DIRECTOR	12/11	03 941 - 421 Date Daytime I	- 78 6 8 6 Phone #	
				Dayline i	TOOLO II	





11/5/03

Fire Department of State Division of Corporations

RE: Document # P01000072062

FEI# 651156460

Please reinstate my corporation, Buck Settles, P.A. I never received my bill for 2003, due to an address change. My current address is: 1314-B. East Venice Ave.

Sincerely,

Buck Settles, P.A.

The Settles Group **RE/MAX** Properties 1314-B East Venice Ave. Venice, Florida 34292