

1042

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 JAN -7 AM 8:53

DOCUMENT # **PO1000075375**

1. Corporation Name

Manna A Catering & Event Company

2. Principal Office Address

1480 Timberlane Road

Suite, Apt. #, etc.

City & State

Tallahassee, FL

Zip

32312

Country

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Zip

Country

REINSTATEMENT 02-05

4. Date Incorporated or Qualified

To Do Business in Florida 08-01-2001

5. FEI Number

Applied For

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

Stephen Duggar

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

1480 Timberlane Road

Suite, Apt. #, Etc.

City

Tallahassee

State

FL

Zip Code

32312

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

Date

REGISTERED AGENT MUST SIGN

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	Stephen Duggar	1480 Timberlane Road	Tallahassee, FL 32312
V	Genny Bailey	1480 Timberlane Road	Tallahassee, FL 32312

600044378066
01/10/05--01001--023 **600.00

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-7-05

CP2E081 (01/04)

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FILED
- SECRETARY OF STATE
DIVISION OF CORPORATIONS

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To whom it may concern,

The reason I did not file the 2001 annual report is that I never received it in the mail. I respectfully request the reinstatement fee be waived. Thanking you in advance for your cooperation.

A handwritten signature in black ink, consisting of a large, stylized 'S' followed by a long, horizontal, slightly wavy line extending to the right.

Stephen Duggar
President
Manna A Catering & Event Company

A small, handwritten mark or signature in the bottom left corner, appearing as a series of connected, slightly irregular loops.