

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

07 JUL 24 AM 9:52

STATE
ALLIANCE, FLORIDA

DOCUMENT # P01000076925

1. Corporation Name

J.R. DENTON ENTERPRISES, INC.

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

5475 N.W. 160th Street

Suite, Apt. #, etc.

City & State

Reddick, Florida

Zip

32686

Country

U.S.A.

3. Mailing Office Address

5475 N.W. 160th Street

Suite, Apt. #, etc.

City & State

Reddick, Florida

Zip

32686

Country

U.S.A.

REINSTATEMENT 02-07

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

59-3736228

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

Jon R. Denton, Jr.

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

5475 N.W. 160th Street

Suite, Apt. #, Etc.

City

Reddick

State

FL

Zip Code

32686

☒ The reinstatement fee is imposed, except in
circumstances which the entity did not receive
the prior notices. By checking this box, you
are certifying the prior notices were not
received and requesting the reinstatement
fee be waived.

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

REGISTERED AGENT MUST SIGN

Date April 6, 2007

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
PSTD	Jon R. Denton, Jr.	5475 N.W. 160th Street	Reddick, Florida 32686
			800106629408 07/24/07-01031-021 **900.00

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 contained in Chapter 119, 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:

Jon R. Denton, Jr.

04/06/2007

(352) 286-6452

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #