


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

10fz

CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
05 MAR 15 PM 4:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 001000092711
1. Corporation Name
DENNIS BENNETT CONST. INC

2. Principal Office Address 6602 NORTH LAGOON DRIVE		3. Mailing Office Address 6602 NORTH LAGOON DRIVE	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State PANAMA CITY, FL		City & State PANAMA CITY, FL	
Zip 32408	Country USA	Zip 32408	Country USA

REINSTATEMENT 03-05

4. Date Incorporated or Qualified To Do Business in Florida

5. FEI Number
80-0029235

6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status

Applied For
Not Applicable

7. Name and Address of Current Registered Agent

Name
DENNIS K. BENNETT

Street Address (P.O. Box Number is Not Acceptable)
6602 NORTH LAGOON DRIVE

Suite, Apt. #, Etc.

City
PANAMA CITY, FL

State
FL

Zip Code
32408

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 Dennis K. Bennett Date 3/08/05

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
VP	ELIZABETH L. BENNETT	6602 NORTH LAGOON DRIVE	PANAMA CITY, FL 32408
PRES	DENNIS K. BENNETT	6602 NORTH LAGOON DRIVE	PANAMA CITY, FL 32408

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: Dennis K. Bennett DENNIS K. BENNETT Date 3/08/05 (850)527-3543

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E081 (01/05)

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**DENNIS BENNETT
CONSTRUCTION, INC.
6602 NORTH LAGOON DRIVE
PANAMA CITY, FL 32408
(850) 233-4463**

8 March 2005

To Florida Department of State
Divisions of Corporations
409 East Gaines St.
Tallahassee, FL 32399

SUBJECT: Corporation Reinstatement for Dennis Bennett Construction, Inc.

Request reinstatement of incorporation and waiver of penalty fees for 2003, 2004 & 2005. During this period I did not receive any notification of fee renewal. Also during this period I have been serving as a member of the US Army Reserve and have been out of the country and local area.

Thank you for your assistance in this matter.



Dennis K. Bennett