

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION



FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

FILED

02 NOV 12 AM 9:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT

DOCUMENT # P01000098299

1. Corporation Name

GORDON & KENNY PROPERTIES, INC.

Principal Place of Business

1255-S FLORIDA AVE.
ROCKLEDGE FL 32955

Mailing Address

1255-S FLORIDA AVE.
ROCKLEDGE FL 32955

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

10/03/2001-

5. FEI Number

59-374 8185

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
PD	GORDON, JOHN WESLEY	1829 LAUREL OAKS DR.	ROCKLEDGE FL 32955
VD	KENNEY, RUTH M	4545 HORSESHOE BEND	MERRITT ISLAND FL 32753
STD	GORDON, DEBORAH S	1829 LAUREL OAKS DR.	ROCKLEDGE FL 32955

300008938983

11/12/02--01093--024 **150.00

8. Name and Address of Current Registered Agent

GORDON, JOHN WESLEY
1829 LAUREL OAKS DR.
ROCKLEDGE FL 32955

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of
Registered Agent

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date 10/25/02

11. 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 #

CR2E040 (8/02)

GORDON & KENNEY PROPERTIES, INC.

1255-F SOUTH FLORIDA AVENUE
ROCKLEDGE, FL 32955
USA

Phone 407-639-6561
Fax 632-9881

November 05, 2002

TO WHOM IT MAY CONCERN:

WE HAVE NOT RECEIVED ANY UBR NOTICES TO DATE. PLEASE ACCEPT THIS FILING FEE ALONG
WITH MY REINSTATEMENT.

SINCERELY,



DEBBY GORDON
SECRETARY
GORDON & KENNEY PROPERTIES