

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE,  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

05 MAR -9 AM 9:37

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P010000114801

1. Corporation Name

Jones & Morman Enterprise  
Inc.

2. Principal Office Address

6918 Catfish Lake

3. Mailing Office Address

same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Jacksonville FL

City & State

same

Zip

Country

32222

USA

Zip

Country

same

4. Date Incorporated or Qualified  
To Do Business in Florida

11-30-01

5. FEI Number

80 0116145

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

Barry Jones

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

6918 Catfish Lake Dr

Suite, Apt. #, Etc.

City

Jacksonville

State

FL

Zip Code

32219

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

Barry Jones

REGISTERED AGENT MUST SIGN

Date 3-1-05

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
<u>President</u>	<u>Barry Jones</u>	<u>6918 Catfish Lake Dr</u>	<u>Jacksonville FL 32222</u>

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:

Barry Jones

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/1/05 (104) 813-3596

Date

Daytime Phone #

CR2E081 (01/05)

Jones & Morman Enterprise  
8367 New Kings Road Suite #1  
Jacksonville, Florida 32219  
Ph (904) 765-6216 Fax(904) 765-6276

March 1, 2005

To whom it may concern:

This letter is to inform you that Jones & Morman Enterprise did not receive our 2000-2005 annual report. Enclosed is a \$600.00 reinstatement check for document number P01000114801. If you should have any questions please do not hesitate to contact me. Thanking you in advance.

Sincerely,

Barry K. Jones  
Owner