

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

08 JUL 28 PM 1:42

DOCUMENT # 701000116045

1. Corporation Name

Jeff + Eric Brown Enterprises, Inc.

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

14 Pryor

Suite, Apt. #, etc.

City & State

Fort Walton Beach, FL

Zip 32548

Country USA

3. Mailing Office Address

14 Pryor

Suite, Apt. #, etc.

City & State

Fort Walton Beach, FL

Zip 32548

Country USA

CR2E081 (12/07)

4. Date Incorporated or Qualified  
To Do Business in Florida

11/27/01

5. FEI Number

59-3759428

☐ 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

Eric Brown

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

14 Pryor

Suite, Apt. #, Etc.

City

Fort Walton Beach

State

FL

Zip Code

32548

☒ 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

Eric E. Brown

Date 7-1-08

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
D	Eric Brown	14 Pryor	A. Walton Bch, FL 32548
D	Jeffrey Brown	15 8th Street	Shalimar, FL 32579
D	Penni Brown	14 Pryor	Fort Walton Bch, FL 32548
			300132373723 07/07/08--01060--013 **300.00
			300132373723 08/05/08--01005--005 **150.00

REINSTATEMENT 06-08

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:

Eric E. Brown ERIC E. BROWN

Date

7-1-08

Daytime Phone #