

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

04 DEC 15 PM 1:40

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # PO2000039925

1. Corporation Name

Joiner Industries, Inc.

800043429398

12/15/04--01020--018 \*\*900.00

**REINSTATEMENT** 03-04

2. Principal Office Address

550 Burnett Road

Suite, Apt. #, etc.

3. Mailing Office Address

550 Burnett Road

Suite, Apt. #, etc.

City & State

Cocoa, Florida

Zip

32926

Country

USA

City & State

Cocoa, Florida

Zip

32926

Country

USA

4. Date Incorporated or Qualified  
To Do Business in Florida

04/08/02

5. FEI Number

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

Willie H. Joiner

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

550 Burnett Road

Suite, Apt. #, Etc.

City

Cocoa

State

FL

Zip Code

32926

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

[Signature]

Date 12/8/04

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
DP	Willie H. Joiner	2202 Mercer Drive	Cocoa, FL 32926
DV	James V. Joiner	889 Spiria Drive	Rockledge FL 32955
DS	Joyce M. SCOWERS	991 PINELAND DRIVE	Rockledge, Florida
DT	Mary M. Mitchell	1514 Clearlake Road #55	Cocoa, FL 32926
			<u>[Signature]</u> 12/15

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:

[Signature]

Willie H. Joiner

Pres

12/8/04

321-639-6413

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (07/04)