PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

				
CORPORATION REINSTATEMENT		DEPARTMENT OF STA Secretary of State VISION OF CORPORATIONS		ORETARY OF STATE LAHASSEE, FLORIDA
DOCUMENT # P02000045176 1. Corporation Name First Coast Land and Timber, Inc.				
			 idea	instatement_03_
2. Principal Office Address	3. Mailing	3. Mailing Office Address		
1015 Atlantic Blvd. Suite, Apt. #, etc.		1015 Atlantic Blvd.		
Suite 124	1	Suite, Apt. #, etc. Suite 124		corporated or Qualified
City & State	City & State			Susiness in Florida 4/19/2002
Jacksonville, FL	l l	Jacksonville, FL		mber Applied For
Zip Country	- Zip	Country	6.	0076877 Not Applicable
32233 Duval	32233	Duva1		ATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status
7. Name and Address of Current Registered Agent				
Wetherhold, Gary Street Address (P.O. Box Number is Not Acceptable) 1015 Atlantic Blvd. Suite, Apt. #, Etc. 124 City Jacksonville, FL 32233 8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0503 or 617.0503, F.S. Signature of Registered Agent Pullands Registered Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)				
Name of		Orda nonprofit corporations must list at least 3 directors) Street Address of Each		<u>' </u>
	titles Name or Officers and/or Directors		Pirector	City / State / Zip
P/D Wetherhold, Ga	D Wetherhold, Gary		4202	JACKSONVILLE, 71, 32150
EO Bothwell, Charles W.		319 Oceanwalk Dr. N.		AHANTIC BEAL, FL 32233
D Shaw, John C.	Shaw, John C.		enue	Jacksonville, FL 32211
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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 filling 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 #				

October 8, 2003

To Whom It May Concern:

First Coast Land and Timber did not receive it's 2003 For Profit Corporation Uniform Business Report. Please waive the \$600.00 reinstatement fee.

Sincerely,

Charles W. Bothwell

Vice President

First Coast Land and Timber