

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 OCT 24 AM 9:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000081394

1. Corporation Name

MACINTOSH COMPUTER CONSULTING, INC.

Principal Place of Business

Mailing Address

9872 EAGLE RIDGE DRIVE
JACKSONVILLE FL 32224

3672 EAGLE RIDGE DRIVE
JACKSONVILLE FL 32224

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

2. New Principal Office Address, If Applicable

13803 Weeping Willow Way
Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State
JACKSONVILLE FL

City & State

Zip
32224

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

07/26/2002

5. FEI Number

51-0431743

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
PTD	FRANCIS, JOHN E	3672 EAGLE RIDGE DRIVE	JACKSONVILLE FL 32224

800024081468
10/24/03--01023--004 **150.00

8. Name and Address of Current Registered Agent

DIAL, RICHARD
4253 UNIV. BLVD. S
SUITE 403
JACKSONVILLE FL 32216

9. Name and Address of New Registered Agent

Name

JOHN E. FRANCIS

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

13803 WEEPING WILLOW WAY
Suite, Apt. #, Etc.

City

JACKSONVILLE

State

FL

Zip Code

32224

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

JOHN E. FRANCIS
REGISTERED AGENT MUST SIGN

Date

10/22/03

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:

JOHN E. FRANCIS
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10/22/03 904 662 6389

Daytime Phone #

CR2E040 (7/03)

RALEIGH M. WILCOX, P.A.

Certified Public Accountant
13500 Sutton Park Drive South
Suite 703
Jacksonville, Florida 32224

Phone (904) 223-9556

Fax (904) 223-1494

October 22, 2003

Florida Department of State
Division of Corporations
Annual Report / Reinstatement Section
P.O. Box 6327
Tallahassee, Florida 32314-6327

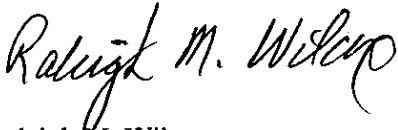
Re: MACINTOSH COMPUTER CONSULTING, INC.
P02000081394

Enclosed please find a check in the amount of \$ 150.00 for the filing fee.

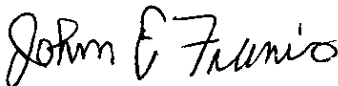
We would like to request reinstatement of the above corporation. The original document was apparently mailed to the registered agent who never forwarded it to the corporate officer and shareholder. Since that time, the corporation has dismissed the registered agent to insure this does not happen in the future.

Thank you for your assistance.

Sincerely,



Raleigh M. Wilcox
Certified Public Accountant



John E. Francis
President