

01/08/03 96092 006 \$150.00
9/11/03 96095 006 \$550.00

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

03 DEC 22 AM 8:00

DOCUMENT # P02000109538

1. Corporation Name

**HILL & COMPANY APPRAISAL & ACQUISITION
ASSOCIATES, INC.**

2. Principal Office Address

5501 Georgia Avenue

Suite, Apt. #, etc.

City & State

West Palm Beach

Zip

33405

Country

U.S.A.

3. Mailing Office Address

5501 Georgia Avenue

Suite, Apt. #, etc.

City & State

West Palm Beach

Zip

33405

Country

U.S.A.

REINSTATEMENT 03

4. Date Incorporated or Qualified
To Do Business in Florida

10/10/2002

5. FEI Number

56-2298503

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

Melanie M. Hill

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

5501 Georgia Avenue

Suite, Apt. #, Etc.

City

West Palm Beach

State
FL

Zip Code

33405

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

Melanie M. Hill

Date **12/16/03**

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
PVST	Melanie M. Hill	5501 Georgia Avenue	West Palm Beach, FL 33405
D	Melanie M. Hill	5501 Georgia Avenue	West Palm Beach, FL 33405

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:

Melanie M. Hill

Melanie M. Hill

12/16/03

561/585-1976

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (10/02)