

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS
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FILED

04 OCT 20 PM 4:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P03000079009**

1. Corporation Name

J.C. Squires, Inc.

2. Principal Office Address

1555 33rd Ave

Suite, Apt. #, etc.

City & State

Vero Beach, FL

Zip

32960

Country

3. Mailing Office Address

1555 33rd Ave

Suite, Apt. #, etc.

City & State

Vero Beach, FL

Zip

32960

Country

REINSTATEMENT 04

4. Date Incorporated or Qualified
To Do Business in Florida

7-17-2003

5. FEI Number

20 0107363

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$6.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Thomas A. Kennedy, Esq.

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

370 35th Ct. SW

Suite, Apt. #, Etc.

City

Vero Beach, FL

State

FL

Zip Code

32968

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

Thomas A. Kennedy

Date **10-18-04**

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
D	Janet C. Squires	1555 33rd Ave	Vero Beach, 32960
D	Jean Brennan	1555 33rd Ave	Vero Beach, 32960
D	Gary Clayton	1555 33rd Ave	Vero Beach, 32960
D	Stephanie Clunn	1555 33rd Ave	Vero Beach, 32960
D	Mary Snyder	1555 33rd Ave	Vero Beach, 32960

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

Janet C. Squires, D **10-18-04**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Law Office of Thomas A Kennedy, P.L.

370 35th Court S.W.

Vero Beach, FL 32968

Office 772-794-4297 Fax 772-562-7032

Florida Bar Member # 528757

Admitted Florida, Maryland, and Washington D.C. Bars

October 18, 2004

Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

ATTN: Corporate filing.

Re: Document # P03000079009, JC Squires Inc., reinstatement.

Dear Secretary/Designee;

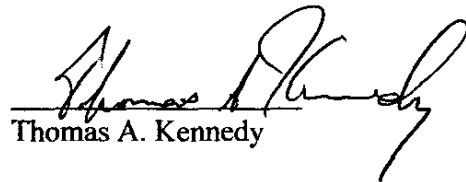
I write to request waiver of the reinstatement fee as provided on your telephone greeting and through your telephone agents as my client suffered from the recent hurricanes Frances and Jeanne, both of which made direct hits at the area surrounding my client's principal address.

The filing deadline, September 8, 2004, came due within 48 hours of landfall of Frances while electric power was still out for at last another week. As you know on the three week anniversary of Frances, Jeanne arrived with significantly greater winds and destructive power.

As offered over the telephone greeting and through your telephone agent with whom I spoke this date, we are seeking waiver due to damage, power outage, curfew, marshal law, mail facility destruction in Vero Beach, and temporary personal and business displacement.

Enclosed please find the \$150.00 Dollar annual fee and a certificate of status fee of \$8.75, along with a copy for stamping and a self-addressed, posted envelope.

If you have any questions or concerns please advise as provided herein.


Thomas A. Kennedy

encl.