2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUN I. Entity Name JMCM, INC		100652		05 APR 28 PM 5: 49
Principal Place 9722 FRONT PANAMA CITY		Mailing Address 9722 FRONT BEACH F PANAMA CITY BEACH,		LA SCECCO LA LA TACEMINA DE EL PLORIDA Y
2. Principal Place of Business		3. Mailing Address		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		03210 2004 9000 DOG SULU
City & State		City & State		4. FEI Number Applied For Not Applicable
Zip	Country	Zip ·	Country	5. Cortificate of Status Desired S8.75 Additional Fee Required
	5. Name and Address of C	urrent Registered Agent	Nome	7. Name and Address of New Registered Agent
MILLER, CI	HAD.A .		Name	
9722 FRON	NT BEACH ROAD CITY BEACH, FL 32407		Street Ad	dress (P.O. Box Number is Not Acceptable)
, Automin C),,,, BE-10,,,, E 0240,			:
		,	City	FL Zip Code
	named entity submits this state ons of registered agent.	ment for the purpose of changing it	is registered office or r	egistered agent, or both, in the State of Florida. I am familiar with, and accept
Fil	E NOWIII FEE IS \$900	36 CV		
10.		AS AND DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
THTUE NAME STREET ADORESS	PST MILLER, CHAD A .9722 FRONT BEACH ROA	☐ Cetate	NAME STREET AEDRESS	CRUD48877722 03/22/0501062001 **150.00
ETTY-ST-ZIP	PANAMA CITY BEACH, F		CITY-SI-ZIP	
TITLE NAME STREET ADDRESS CITY-S1-ZIP		🗋 Deten	NAME STREET ADDRESS COTY-ST-ZIP	MICHER, CHAD A. Change Addition 972 Front Beneu Rond PANAM Cory BENCH, Fr. 3 407
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Dolete	TITLE NAME STREET ACCRESS CITY-ST-ZIP	DIR. Pres. Charge X Addition MANNER, JOANIE K. 9722 FRONT BENEW ROAD DANNER Comp BENEW, FW 32407
THUE NAME STREET ADDRESS CITY - ST - ZIP		. Delete	NAME STREET ACORESS CATY-ST-ZIP	☐ Change ☐ Addition
tifle Name Street address CIPY-ST-ZIP		□ Deiere	Trile Name Street Address City- St-Zip	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS		☐ Defete .	TITLE . NAME STREET ADDRESS	. ☐ Change ☐ Addition.
CITY:ST-ZP	. ` . ` -		GITY-ST-DP	and the same
indicated of the cor	tion this report or supplemental rporation or the receiver or trust	olied with this filing does not qualify report is true and accurate and that see empowered to execute this repo ddress, with all other like empowere	n my signalure shall he on as required by Cha	ed in Section 119.07(3)(). Florida Statutes. I further certify that the information ave the same legal effect as if made under ooth; that I am an officer on director prer 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if
SIGNAT	TURE: AUTHATURE AND T	YPED OR PRINTED NAME OF SIGNING OFFIC	ER ON DIRECTOR	4-27-05 Date Dating Phone 9

CHARLES A. TIPTON, JR.
CERTIFIED PUBLIC ACCOUNTANT

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#5 MIRACLE STRIP LOOP, SUITE 5 EMERALD COAST PROFESSIONAL CENTER PANAMA CITY BEACH, FLORIDA 32407, TELEPHONE (850) 234-7257 FACSIMILE (850) 234-7258

March 4, 2005

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee. FL 32314

Re:

JMCM, Inc.

Ref. Number: P03000100652

Ladies & Gentlemen:

We are trying to achieve the reinstatement of my client, whom you administratively dissolved. As you can tell from my previous letter, there has been some confusion regarding the Company's 2004 filing.

I did not represent the Company in 2004, and my client did not recall filing the annual report. Your office has now advised us that the 2004 report was mailed and paid, but was rejected for lack of an identification number. My client believes they did not receive your rejection letter of February 12, 2004, for it would have been a simple matter to add the identification number and return the form to you.

I believe my client has grounds to request a waiver of the reinstatement fee because (1) they did not receive your rejection notice; (2) Bay County was impacted by Hurricane Ivan on September 15, 2004. If the request for waiver is granted, my client will owe only \$150, which is the fee for 2005. A check for that amount is enclosed.

Thank you for your assistance. Please advise us if you need anything else.

Very truly yours,

Charles A. Tipton, Jr.

Enclosures

CAT/dkm