

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

10fz

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

05 OCT 31 PM 5:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P03000129242

1. Corporation Name

Curt Allen Docks, Inc.

2. Principal Office Address

278-25th Avenue

Suite, Apt. #, etc.

N/A

City & State

Apalachicola, FL

Zip

32320

Country

USA

3. Mailing Office Address

278-25th Avenue

Suite, Apt. #, etc.

N/A

City & State

Apalachicola, FL

Zip

32320

Country

USA

REINSTATEMENT

04-05

**4. Date Incorporated or Qualified
To Do Business in Florida**

11/05/2003

5. FEI Number

52-2436852

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

Curtis C. Allen, Jr.

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

278-25th Avenue

Suite, Apt. #, Etc.

N/A

City

Apalachicola

State

FL

Zip Code

32320

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**

Date October 28, 2005

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, P.	Curtis C. Allen, Jr.	278-25th Avenue	Apalachicola, FL 32320

200061040102
10/31/05--01038--002 **300.00

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:

Curtis C. Allen, Jr.

Curtis C. Allen, Jr. 10/28/05

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

850-653-9226

20f2

October 28, 2005

Curtis C. Allen, Jr.
278 - 25th Avenue
Apalachicola, Florida 32320

Department of State
Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314

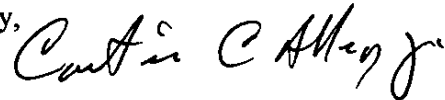
Re: Curt Allen Docks, Inc.

Dear Sir/Madam:

Enclosed is my check payable to you in the amount of \$300.00, for the annual reports due on May 1, 2004 and May 1, 2005, along with my completed form for Corporate Reinstatement.

I did not receive the notices for me to file these annual reports. I formed this corporation in 2003. I will be more diligent in timely filing annual reports and paying annual fees. I request that you waive the \$600.00 reinstatement fee.

Sincerely,



Curtis C. Allen, Jr

Enc: As Stated