

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

06 JUN 12 AM 7:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P O 3000142457

1. Corporation Name

Oan Selden Carpentry Inc.

2. Principal Office Address

7805 Pensacola Rd

Subs. Apt. #, etc.

City & State

Ft. Pierce FL

Zip

34951

County

St. Lucie

3. Mailing Office Address

7805 Pensacola Rd.

Subs. Apt. #, etc.

City & State

Ft. Pierce FL

Zip

34951

County

St. Lucie

REINSTATEMENT

04-06

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

12-1-03

5. FEI Number

20-4989250

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESired

☒ Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Daniel R. Seavoy

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

7805 Pensacola Rd.

Subs. Apt. #, etc.

City

Ft. Pierce

State

FL

Zip Code

34951

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

Daniel R. Seavoy

REGISTERED AGENT MUST SIGN

Date 6-6-06

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	Danie J. Selden	7805 Pensacola Rd	Ft. Pierce FL 34951
VP	Joseph Lucas	3516 Roselawn Blvd	Ft. Pierce FL 34982
TREA	Jeremy Johnson	7808 Lakeland Blvd	Ft. Pierce FL 34951
Sec	Joshua Wall	7202 Kenwood Ave	Ft. Pierce FL 34951

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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 contained in Chapter 119, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-7-06

Date

Signature Print #

B. Mitchell

JUN 14 2006

20fz

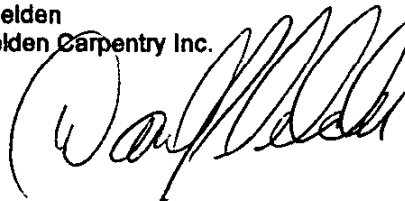
To whom it may concern,

In regards to the reinstatement fee for my corporation,(Dan Selden Carpentry Inc.) I did not recieve my annual report notices in the year of dissolution/revocation.

I have enclosed with my application for reinstatement monies for the annual report fee and corporate supplemental fee.

Thank you for your time.

Dan Selden
President Dan Selden Carpentry Inc.

A handwritten signature in black ink, appearing to read 'Dan Selden', written over the printed name.

6-8-06