

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P04000039156

1. Entity Name
CHARLIE'S LOGGING, INC.



FILED

08 AUG -6 PM 2:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



08062008 REIN-P CR2E098 (1/07)

Principal Place of Business

~~17506 NW CR 12~~
~~BRISTOL, FL 32321~~

Mailing Address

~~17506 NW CR 12~~
~~BRISTOL, FL 32321~~

2. Principal Place of Business, No P.O. Box #

7704 NW MARTIN
Luther Road
Bristol Florida
32321
U.S.A.

3. Mailing Address

7704 NW MARTIN
Luther King Road
Bristol Florida
32321
U.S.A.

4. FEI Number
41-2128764

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

~~MOWREY, RONALD A~~
~~MOWREY & BIGGINS, P.A.~~
~~646 R ADAMS ST~~
~~TALLAHASSEE, FL 32301~~

7. Name and Address of New Registered Agent

Name Jimmy Hatcher
Street Address (P.O. Box Number is not Acceptable)
7704 NW Martin Luther King Road
City Bristol FL Zip Code 32321

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Jimmy Hatcher
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE August 6, 2008

FILE NOW!!! FEE IS \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	PO	<input checked="" type="checkbox"/> Delete
NAME	VICKERS, LISA	
STREET ADDRESS	PO BOX 000	
CITY - ST - ZIP	BRISTOL, FL 32321	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	CEO - P&T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Jimmy Hatcher	
STREET ADDRESS	7704 NW Martin Luther King Road	
CITY - ST - ZIP	Bristol Florida 32321	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Jimmy Hatcher

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

850-6432655