

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

07 JAN 12 PM 3:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P04000152124

1. Corporation Name

ACTION-HOSTING INC.

6003 Kingsley Lk Dr.

2. Principal Office Address

~~P.O. BOX 2159~~

3. Mailing Office Address

P.O. BOX 2159

REINSTATEMENT

Suite, Apt. #, etc.

Apt # 13

Suite, Apt. #, etc.

City & State

MIDDLEBURG, FL

City & State

MIDDLEBURG, FL

Zip

32050-2159

Country

U

Zip

32050-2159

Country

4. Date Incorporated or Qualified
To Do Business in Florida

12/01/2004

5. FEI Number

20-1837142

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

S B FORDHAM

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

1241 S MCDUFF AVE

Suite, Apt. #, Etc.

City

JACKSONVILLE

State
FL

Zip Code

32205

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

A.B. Fordham

Date 12-11-06

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
P	DANNY E. THOMAS	P.O. BOX 2159	MIDDLEBURG, FL
VP	KATHY J. THOMAS	P.O. BOX 2159	MIDDLEBURG, FL
T	MICHAEL M. THOMAS	P.O. BOX 2159	MIDDLEBURG, FL

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: X

Daniel E Thomas
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

12/13/06

Daytime Phone #

904 859 1305

K. Eckel JAN 17 2007

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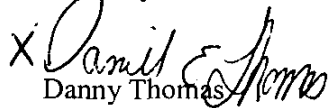
December 11, 2006

Re: Action-Hosting, Inc.

To Whom It May Concern:

This letter is a request to waive the reinstatement fee and any other penalty fees for my corporation. Our address has been changed for the last 2 years and I never received or knew I was supposed to file an annual report. This will not happen again in the future and a check for \$300.00 is enclosed to pay our account in full. Thank you for your time and consideration in this matter.

- Sincerely,

X 
Danny Thomas
President