

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM


FILED

08 FEB -4 AM 9:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

900117050699
02/05/08--01018--021 ***450.00

REINSTATEMENT 06-08^{KS}
CR2E081 (12/07)

CORPORATION REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

PO5000143665
DEW-CRAFT CONST., INC.

2. Principal Office Address - No P.O. Box #

571 Ivy St

Suite, Apt. #, etc.

3. Mailing Office Address

571 Ivy St.

Suite, Apt. #, etc.

City & State

Macleenny FL

City & State

Macleenny FL

Zip

32063

Country

U.S.A.

Zip

32063

Country

U.S.A.

7. Name and Address of Current Registered Agent

Name

Dewey J. Rayburn

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

571 Ivy St.

Suite, Apt. #, Etc.

City

Macleenny

State

FL

Zip Code

32063

4. Date Incorporated or Qualified
To Do Business in Florida

10-24-05

5. FEI Number

16-1737140

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

☒ The reinstatement fee is imposed, except in
circumstances which the entity did not receive
the prior notices. By checking this box, you
are certifying the prior notices were not
received and requesting the reinstatement
fee be waived.

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

Dewey J. Rayburn
REGISTERED AGENT MUST SIGN

Date 1-29-08

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
Pres	Dewey J. Rayburn	571 Ivy St.	Macleenny FL 32063

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:

Dewey J. Rayburn Dewey J. Rayburn 1-29-08 904) 254-2847
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #