

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

12 MAY 15 AM 9:31

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P06000051753

1. Corporation Name

Jerry L. Griffin, Inc.

400230231594  
04/20/12--01003--006 \*\*900.00

CR2E081 (11/10)

4. Date Incorporated or Qualified  
To Do Business in Florida 04/11/2006

5. FEI Number 20-46 10 32 9 ☐ 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

Steven W. Conner

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

1106 Park Avenue

Suite, Apt. #, Etc.

City

Orange Park

State

FL

Zip Code

32073

11-12  
REINSTATEMENT

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

*Steven W. Conner*

Date 4-17-12

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<br>Officers and/or Directors | Street Address of Each<br>Officer and/or Director | City / State / Zip    |
|--------|--------------------------------------|---|-----------------------|
| P      | Jerry L. Griffin                     | 136 Old Jennings Rd                               | Orange Park, FL 32065 |
| VP     | Jerry L. Griffin                     | 136 Old Jennings Rd                               | Orange Park, FL 32065 |
| S      | Jerry L. Griffin                     | 136 Old Jennings Rd                               | Orange Park, FL 32065 |
| T      | Jerry L. Griffin                     | 136 Old Jennings Rd                               | Orange Park, FL 32065 |
|        |                                      |   |                       |
|        |                                      |   |                       |
|        |                                      |   |                       |

MAY 15 2012

10. E-mail Address: firm@gmail.com

T. SCOTT

(To be used for future annual report notification)

11. 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., and that all fees owed by the corporation have been paid. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s. 817.155, F.S.

SIGNATURE:

*Jerry L. Griffin*

Jerry L. Griffin, President

4/11/2012

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #