

MAY-26-2005 13:27

CT CORP CLAYTON TEAM 2

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P.02

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

05 MAY 26 PM 12:28

SECRET
TALLAHASSEE, FLORIDA

KR

REINSTATEMENT 01-05

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P13822			
1. Corporation Name Horton Drywall, Inc.			
2. Principal Office Address 10603 Maumelle Blvd. Suite, Apt. #, etc.		3. Mailing Office Address P.O. Box 13620 Suite, Apt. #, etc.	
City & State North Little Rock, AR		City & State Maumelle, AR	
Zip 72113	Country	Zip 72113-0620	Country

4. Date Incorporated or Qualified To Do Business in Florida 03/30/1987	
5. FEI Number 710546319	Applied For Not Applicable
6. CERTIFICATE OF STATUS DESIRED ☐ SEE INSTRUCTIONS FOR FILING OF THIS FORM	

7. Name and Address of Current Registered Agent	
Name CT Corporation System	
Street Address (P.O. Box Number is Not Acceptable) 1200 S. Pine Island Road	
Suite, Apt. #, Etc.	
City Plantation	State FL
	Zip Code 33324

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 <i>John S. Quinn</i> John S. Quinn REGISTERED AGENT MUST SIGN	Date 5/26/2005

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.	Kevin Horton	10603 Maumelle Blvd.	North Little Rock, AR, 72113
Sec/Treas	Cindy Horton	10603 Maumelle Blvd.	North Little Rock, AR, 72113
Dir.	Kevin Horton	10603 Maumelle Blvd.	North Little Rock, AR, 72113
Dir.	Cindy Horton	10603 Maumelle Blvd.	North Little Rock, AR, 72113

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 under section 119.07(3)(f), 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: <i>Kevin Horton</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Kevin Horton, President 05-25-05 501-758-5041 Date Daytime Phone #

Division of Corporations

Page 1 of 1

Florida Department of State
Division of Corporations
Public Access System

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To:

Division of Corporations
Fax Number : (850) 205-0384

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5926

CORPORATION REINSTATEMENT

HORTON DRYWALL, INC.

Certificate of Status	0
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