

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P15863

1. Corporation Name
Michael L Cook Inc.

2. Principal Office Address
4070 Crockett St.

3. Mailing Office Address
same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Richmond, Va

City & State

Zip 23228 Country Henrico

Zip Country

FILED
04 MAR -3 AM 10:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

~~600030248866~~
~~03/10/04--01078--012 **450.00~~

REINSTATEMENT 02-04-

12/18/02 01066 020 \$750.00

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number 54-1069971

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 600030248866

Name CT Corporation

03/10/04--01078--012 **458.75

Street Address (P.O. Box Number is Not Acceptable) 1200 S. Pine Island Rd

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 [Signature]
REGISTERED AGENT MUST SIGN

Date 2/27/04

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.	Michael L. Cook	4070 Crockett St	Richmond, Va 23228
VP	Ted D. Cook	1346 Grace Ave.	Panama City, FL 32401
VP	David C. Cook	4070 Crockett St	Richmond, Va 23228
VP	Anthony S. Cook	4070 Crockett St	Richmond, Va. 23228

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)(i), 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: Anthony Cook VP
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/24/04 804.515.7601
Date Daytime Phone #

CPRE001 (01/04)