

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

05 APR -7 PM 12:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 993 00000 8456

1. Corporation Name
Barnes & Murrell, Inc.

2. Principal Office Address
2825 Business Center Blvd.

3. Mailing Office Address
2825 Business Center Blvd.

Suite, Apt. #, etc.
Suite C-1

Suite, Apt. #, etc.
Suite C-1

City & State
Melbourne, FL

City & State
Melbourne, FL

Zip Country
32940 U.S.A.

Zip Country
32940 U.S.A.

4. Date Incorporated or Qualified
To Do Business in Florida 1-29-1993

5. FEI Number
59-3161451

Applied For
Not Applicable

6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required
for a Certificate of Status

REINSTATEMENT 02-05

7. Name and Address of Current Registered Agent

Name
Donald L. Simms

Street Address (P.O. Box Number is Not Acceptable)
2825 Business Center Blvd.

Suite, Apt. #, Etc.
Suite C-1

City
Melbourne

State Zip Code
FL 32940

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

REGISTERED AGENT MUST SIGN

Date April 6, 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
P	Edward A. Van Gunten	6545 W. Central Avenue, Suite 209	Toledo, OH 43617-1034
V/S/T	Donald L. Simms	2825 Business Center Blvd., Ste C-1	Melbourne, FL 32940

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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)(l), 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:

Donald L. Simms

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/6/2005

Date

(321) 259-0202

Daytime Phone #

CR2E081 (01/05)