

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

03 OCT 21 PM 1:31

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P93000038873

1. Corporation Name

KEN HUNTER & PAUL DEWITT AUTOMOTIVE, INC.

Principal Place of Business

Mailing Address

433 WALKER STREET  
SUITE 5-B  
HOLLY HILL FL 32117

433 WALKER STREET  
SUITE 5-B  
HOLLY HILL FL 32117

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



REINSTATEMENT

03

4. Date Incorporated or Qualified To Do Business in Florida

05/25/1993

5. FEI Number

59-3183227

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
C	HUNTER, KENNETH D	433 WALKER ST #5B	HOLLY HILL FL 32117

400023985724  
10/21/03--01137--010 150.00

10/10/24

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

DEWITT, PAUL  
433 WALKER STREET  
SUITE 5-B  
HOLLY HILL FL 32117

Name \_\_\_\_\_

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

Suite, Apt. #, Etc. \_\_\_\_\_

City \_\_\_\_\_ State **FL** Zip Code \_\_\_\_\_

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of Registered Agent

*Paul Dewitt*

REGISTERED AGENT MUST SIGN

Date 10-17-03

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., 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: PAUL DEWITT *Paul Dewitt*

10-17-03

386-254-5000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E040 (7/03)

**KEN HUNTER-PAUL DEWITT AUTOMOTIVE, INC**

433 Walker St. #5B  
Holly Hill, FL 32117  
386-254-5000

October 17, 2003

Florida Department of State  
Glenda E. Hood  
Secretary of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Dear Secretary:

I was quite shocked to receive a notice of revocation for our S-corporation.  
We definitely did not receive any prior notices for the uniform business report(UBR)

We respectfully request that our corporation be reinstated without penalty.

Thank you for your consideration,

  
Paul DeWitt