

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

FILED

97 JAN -2 PM 4:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000047558

1. Corporation Name

THOMLEY ENTERPRISES, INC.

Principal Place of Business Mailing Address

~~6510 WEST JACKSON STREET~~
PENSACOLA FL 32516

POST OFFICE BOX 36124
PENSACOLA FL 32516



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

2. New Principal Office Address, If Applicable

4830 West Jackson St.

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Pensacola, FL.

City & State

Zip

32506

Country

Escambia

Zip

Country

REINSTATEMENT

4. Date Incorporated or Qualified
To Do Business in Florida

06/29/1993

5. FEI Number

62-1546376

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 (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
P	THOMLEY, CHARLES W SR.	6510 WEST JACKSON STREET 4830 West Jackson	PENSACOLA FL 32516 32506
V	THOMLEY, ANNETTE R	6510 WEST JACKSON STREET 4830 West Jackson	PENSACOLA FL 32516 32506
			100002051981--4 -01/09/97--01021--013 ****375.00 ****375.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

THOMLEY, CHARLES W SR.
~~6510 WEST JACKSON STREET~~ 4830 West Jackson St.
PENSACOLA FL ~~32516~~ 32506

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.

Signature of
Registered Agent

Charles W. Thomley Sr.

REGISTERED AGENT MUST SIGN

Date Dec. 30, 1996

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☒ No ☐

(See other side for information
on intangible tax.)

12. 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: Charles W. Thomley Sr. President

Dec. 30, 1996 904-452-4111

C12E040 (7/96)