## 2004 FOR PROFIT CORPORATION REINSTATEMENT

APPROVEL PS 1 8 2 **DOCUMENT # P94000081667** 404 OCT 28 AM 10: 35 1. Entity Name BLOCKERS TREE FARM, INC. SECRETARY OF STATE Principal Place of Business Mailing Address 3510 E GANDY RD 3510 E GANDY RD 90104030 150,00 BARTOW, FL 33830 BARTOW, FL 33830 2. Principal Place of Business 3. Mailing Address 465 E. Hooker St Suite, Apt. #, etc. Suite, Apt. #, etc. 10262004 REIN-P CR2E098 (6/04) Applied For City & State City & State 4. FEI Number 201ta 59-3278063 Not Applicable Zíp Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 338<u>30</u> Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BLOCKER, J. M. SR Street Address (P.O. Box Number is Not Acceptable) 3510 E GANDY RD BARTOW, FL 33830 City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOWIII FEE IS \$150.00 In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. After January 1, 2005, Fee will be \$300.00 OFFICERS AND DIRECTORS 10. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE Change Change Addition BLOCKER, J. M. JR NAME NAME 465E HOOKERST. 3510 E GANDY RD STREET ADDRESS STREET ADDRESS BARTOW, FL 33830 CITY-ST-78P CITY-ST-ZIP Sartow, Pl. Delete ☐ Addition TITI F ΣITI F ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY-ST-ZIP ☐ Delete Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ☐ Addition Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS City-St-7IP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. SIGNATURE: AG OFFICER OR DIRECTOR Daytime Phone #

Blockers Tree Farm Inc 465 E Hooker St Bartow, Fl. 33830 59-3278063 October 26, 2004

FLORIDA DEPARTMENT OF STATE DIVISIONS OF CORPORATIONS PO BOX 6327 TALLAHASSEE, FL. 32314

To Whom It May Concern:

Please see attached copies of the front of the bank statement and the cancelled check showing that check number 2496 cleared in the amount of \$150.00 on 8/6/2004.

Also, see attached the signed 2004 Corporation Reinstatement form for Blockers Tree Farm with the correct mailing address.

I did not receive the notices mailed to 3510 E Gandy Rd Bartow, Fl.

I am asking for the abatement of the \$600.00 reinstatement fee.

Thank you,

J.M. Blocker Jr.