


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. 915.00

APPLICATION FOR REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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FILED

97 JUN 18 AM 9:46

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # P95000001016

1. Corporation Name
PANTHER FARMS, INC.

Principal Place of Business 11983 TAMiami TR. N. SUITE 126 NAPLES, FL 33963	Mailing Address 11983 TAMiami TR. N. SUITE 126 NAPLES, FL 33963
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If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable 1351 RAIL HEAD BLVD. Suite, Apt. #, etc. UNIT 2 City & State NAPLES, FL Zip 34110	3. New Mailing Office Address, If Applicable 1351 RAIL HEAD BLVD. Suite, Apt. #, etc. UNIT 2 City & State NAPLES, FL Zip 34110
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REINSTATEMENT

96-97
ad

DO NOT WRITE IN THIS SPACE

4. Date Incorporated or Qualified To Do Business in Florida
01/03/95

5. FEI Number
65-0544106

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)			
Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
D	HALL, M. CECIL	1926 VILSAND AVE.	NAPLES, FL 33942
D	MCBRIDE, J. D. , JR.	204 Sherwood Drive	THOMASVILLE, GA 31792
			000002217640--8 -06/19/97--01115--017 *****910.00 *****910.00
			000002217640--8 -06/19/97--01115--018 *****5.00 *****5.00

8. Name and Address of Current Registered Agent M. CECIL HALL 11983 TAMiami TR. N. SUITE 126 NAPLES, FL 33963	9. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 1351 RAIL HEAD BLVD. Suite, Apt. #, Etc. UNIT 2 City NAPLES
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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 *M.C. Hall* Date *4/30/97*

REGISTERED AGENT MUST SIGN

11. If this corporation is a non-profit with I.R.S. 501(c)(3) tax exempt status, check this box ☐ (See other side for additional information.)

12. 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.)

13. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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., and that all fees owed by the corporation have been paid. 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: *M.C. Hall* *4/30/97* *1514-1110*

CR2E040 (6/95)