PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

03 DEC 26 AM 8:54

SECRETARY OF STATE TALLAHASSITE FLORIDA

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Glenda E. Hood

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P95000032478

1. Corporation Name

Principal Place of Business Mailing Address					_			
7869 BRIARCREEK ROAD WEST TALLAHASSEE-FL 32308		7869 BRIARCREEK ROAD WEST						
US If above a	addresses are incorrect in any way, line	US through incorrect in	oformation and ente	er correction below		TATEMENT		
2. New Principal Office Address, If Applicable		3. New Mail	New Mailing Office Address, If Applicable			Date Incorporated or Qualified To Do Business in Florida 04/26/1995		
Suite, Apt.		Suite, Apt. #, etc. City & State		· · · · · · · · · · · · · · · · · · ·	5. FEI Number 59-3310025		Applied For	
Zip Country		Zip Counti		ıtry	6. CERTIFICATE OF STATUS DESIRED S8.75 Additional Fee require for a Certificate of Status			
7. Names	and Street Addresses of Each Officer a	nd/or Director (Flo	rida nonprofit corpo	orations must list at le	east 3 directors)			
Title(s)	Name of Officers and/or Directors		Street Address of Each Officer and/or Director		City / State / Zip			
D	GERRY, PAULA S	7869 BRIARCRI	eek RD. West		TALLAHASSEE FL 32312			
D	GERRY, JOHN R		7869 BRIARCREEK RD. WEST		, 440-4, 4	TALLAHASSEE FL		
					4 0 12/26/	00257606 03-01006-004	□ 4 **150,00	
	·							
	}	<u> </u>						
Name and Address of Current Registered Agent				Name and Address of New Registered Agent				
GERRY, JOHN R 7869 BRIARCREEK ROAD WEST TALLAHASSEE FL 32308				Name Street Address (Street Address (P.O. Box Number is Not Acceptable)			
				Suite, Apt. #, Etc.				
- 	والمعروف والمعروف والمساورة والمساورة			City		State	Zip Code	
	g appointed the registered agent of the a			<u> </u>		FL	<u> </u>	

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 filling this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F# 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 infirmation indicated

on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

REGISTERED AGENT MUST SIGN

SIGNATURE

Signature of Registered Agent

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER

Gerry Construction 7869 Briarcreek Rd., West Tallahassee, Florida 32312

December 20, 2003

To Whom It May Concern,

This is a letter to notify you that we did not receive the uniform business report (UBR) notices. Gerry Construction Company would like to submit our application for reinstatement and the appropriate UBR filing fee and this letter.

Thanks for your time.

Sincerely,

John R. Gerry

Document # P95000032478