PLEASE I	READ ALL INS		COMPLETING THIS FOR	M. ,
APPLICATION FOR	FLOR	N LEPAR ALEN O TRE at Ca B. Mortham Solutary of State	APPROVEO AUD FILED	··· /
REINSTATEMENT		DIVISION OF CORPORATIONS	657 0FC 15 EN 1	D: 15
Corporation Name	50000678	SHOULTARY DE S	TATE ORIGIA	
Lathern Auto Sa	les Incol	rprrated	190. Chance	
Principal Place of Business	Mailing Add	tross		
3520 N. Cocoso Coco A F1 329				
COCCA F. GLY	726			
If above addresses are incorrect in any way, line through incorrect in 2. New Principal Office Address, If Applicable 3. New Maile		information and enter correction below. iling Office Address, If Applicable	4. Date Incorporated or Qualified To Do Business in Florida 1. The state of the st	
Suite, Apt. #, etc. Suite, Apt. #,		H, etc.		
City & State	City & State		59-3333457	Not Applicable
Zip Country	Zip	Country	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 (Flo Name of Officers and/or Directors		orida nonprofit corporations must list at lea Street Address of Each Officer and/or Director 3 (Do NO1 Use Post Office Box N	City	/ State / Zip
President Douglas W. Lathem 2580 n. Cox Roa.			<u> </u>	F/32906
President Steven D.	hathem	54. Coron F1 32826		
_	Lathem	1580 M. Cox Roo		-
			30000237	59837
	·	-12/17/9701120010 ****365.00 ****365.0		
				4
8. Name and Address o	f Current Registered Ag		9. Name and Address of New Registere	ed Agent
Linda S. Lathem Street Address (P.O. Box Number is Not Acceptable)				2 m
3230 . n. Coc	on BIVS	n. Cocon Blid	2 2 2 3	
COCOA FI 3	2926	City	St	ate Zip Code L 32926
10. I, being appointed the registered agent	of the althive named corp.	oration, am familiar with and accept the ob	ligations of Section 607.0505, F.S.	L 32926
Signature of Registered Agent	REGISTERED AG	SENT MUST SIGN	Date /Z.	12.97
 Does this corporation Dept. of Revenue und 	pay any intanç der S. 199.032,	gible tax to the Florida Statutes. Yes	No (See other on in	side for information tangible tax.)
 owed by the corporation have been paid 	n for dissolution has been d and the names of individ	mpowered to execute this application as pro- n eliminated, the corporate name satisfies to duals listed on this form do not qualify for a two the same legal effect as if made under of	he requirements of section 607.0401 or 6 7 in exemption under section 119.07(3)(i).	that when filing .S., that all fees .A. the information indicated
SIGNATURE: SIGNATURE AND TYP	Definited NAME OF S	SIGNING OFFICER OR DIRECTOR	12.17-57 405	7635 92 44 Daytinic Phone #





3520 N. Cocoa, Blvd. Cocoa, FL 32926 (407) 636-6633

December 12, 1997

Department of State Division of Corporations PO Box 6327 Tallahassee, FL 32314

To Whom It May Concern:

Per our phone conversation concerning the fact that Lathern Auto Sales Inc. has not filed their annual report for 1996 & 1997.

I was told due to the fact you had an incorrect mailing address, I would not be accessed any fines or penalties. To correct this I am paying the fee for 1996 in the amount of \$200.00 and the fee for 1997 in the amount of \$165.00 a total of \$365.00 to get reinstated.

If you have any further questions please feel free to contact me at 407-635-9244.

Sincerely,

Linda S. Lathem

Sendo & Solher

Secretary