

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

04 MAR -1 PM 12:56

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

REINSTATEMENT 02-04

DOCUMENT # P95000067944

**1. Corporation Name**

Derrick's -Bar-B-Que Inc.

**2. Principal Office Address**

894 SW Main Blvd

Suite, Apt. #, etc.

City & State

Lake City, FL

Zip

32055

Country

USA

**3. Mailing Office Address**

894 SW Main Blvd

Suite, Apt. #, etc.

City & State

Lake City, FL

Zip

32055

Country

USA

100029591941  
03/01/04--01042--016 \*\*1058.75

**4. Date Incorporated or Qualified  
To Do Business in Florida** 08/28/1995

**5. FEI Number**  
593330746

Applied For

Not Applicable

**6. CERTIFICATE OF STATUS DESIRED** ☒

\$8.75 Additional Fee required  
for a Certificate of Status

**7. Name and Address of Current Registered Agent**

Name  
Derrick Blaine Bannister

Street Address (P.O. Box Number is Not Acceptable)  
894 SW Main Blvd

Suite, Apt. #, Etc.

City  
Lake City

State  
FL

Zip Code  
32055

**8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.**

Signature of  
Registered Agent

*[Signature]*  
REGISTERED AGENT MUST SIGN

Date 02/23/2004

**9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)**

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	Derrick Bannister	894 SW Main Blvd	Lake City, FL 32055
S	Wendy Bannister	894 SW Main Blvd	Lake City, FL 32055

**10. 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DERRICK B BANNISTER 02/23/2004

Date

(386)754-5907

Daytime Phone #

CR2001 (01/04)