	LE ASE READ AL	.MST	RUCTIONS	BEFORE C	OMPLETI	NG THIS FC	DRM.	
. APF	PLICATING A		DEPARTMEN andra B. Mort				•	
REINSTATEMENT Secretary of State DIVISION OF CORPORATIONS					FILED			
DOCUMENT # P95000083718					98 DEC -7 AM 9: 46			
1. Corporation Name CHEROKEE PARKING BUMPERS, INC.					SECRETARY OF STATE TALLAHASSEE, FLORIDA			
Principal Place of Business Mailing Address					,			
4800 Patch Rd. PO Box 72123 11112 OWNBY 07 ORLANDO FL 02837 32822 32872				έ φ				
			formation and enter on Office Address, If A			rated or Qualified		
Suite, Apt. #		Suite, Apt. #,	etc. X		5. FEI Number		10/26/1995 Ap	oplied For
City & State	NDO FL	State State	FC Country	15 P-	6.	59-3341568 OF STATUS DESIRED	\$8.75 Additiona	
7. Names a	SJZ USAL and Street Addresses of Each Officer and/or E	Director (Flor			ast 3 directors)	of of Arou Desires	for a Certifica	te or status
Title(s) 1	and/or Directors Offi			et Address of Each cer and/or Director Post Office Box No	•	4	City / State / Zip	
D	HERNDON, WILLIAM K 11112 OWNBY CT 26,23 Crocks:				irde_	Orlando FL 32	897 FL 3270	65
VP	HANSEN, WANDA			DURT		ORLANDO FL:-		
					000002712590-5 -12/15/98-01029-014 ****150.00 ****150.00			
	8. Name and Address of Current Reg	istered Age	nt		9. Name and A	ddress of New Reg	sistered Agent	
Name					Buyo			
HERNDON, WILLIAM K 11112 OWNBY-CT 2623 Creekview Cir ORLANDO FL 32837				Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc.				
Oviedo FL 32765				City			State Zip Code	
10. 1, 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 REGISTERED AGENT MUST SIGN Date								
11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No (See other side for information on intangible tax.)								
12. 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 Date Daytime Phone #								

CHEROKEE PARKING BUMPERS, INC.

November 30, 1998

Florida Department of State Annual Report/Reinstatement Section P.O. Box 6327 Tallahassee, FL 32314-6327

REF: Document P95000083718

FEI # 59-3341568

To Whom It May Concern:

We did not receive the form to send in because it was sent to the old address of 1112 Ownby Ct, Orlando, FL 32837. We moved from that address March of 1997 and the person there did not forward the form to us. She did however forward the reinstatement form to us.

Per my conversation with Andy in your office I am enclosing the check for \$150.00 and correcting the officers and address changes necessary to make sure this does not happen again.

Thank you for your understanding and patience.

Sincerest Regards and Happy Holidays,

William K Herndon

President

WKH/jlm cc: File copy