PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

FILED
05 NOV 29 AM 11:35
TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000005671

REINSTATEMENT 03-05

CR2E081 (8/05)

1. Corporation Name
HANNER CONSTRUCTION COMPANY

2. Principal Office Address		3. Mailing Office Address	
1143 45TH AVE NE		1143 45TH AVE NE	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State: ST. PETERSBURG, FL		City & State: ST. PETERSBURG, FL	
Zip: 33703	Country: US	Zip: 33703	Country: US

4. Date Incorporated or Qualified To Do Business in Florida: 01/17/1996

5. FEI Number: 59-3360252 — Applied For ☐ Not Applicable ☐

6. CERTIFICATE OF STATUS DESIRED ☐ — $9.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: JOHN C HANNER

Street Address (P.O. Box Number is Not Acceptable): 1143 45TH AVE NE

Suite, Apt. #, Etc.:

City: ST. PETERSBURG, FL — State: FL — Zip Code: 33703

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 _____ Date _____

REGISTERED AGENT MUST SIGN

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
PD	JOHN C HANNER	1143 45TH AVE NE	ST. PETERSBURG, FL
			33703
			400061744744 11/28/05--01016--010 **1050.00

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: _____ JOHN C. HANNER — 11/11/05 — 727.525.0025

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #