

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

FILED

07 JAN 25 AM 8:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1082

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600003695 1

1. Corporation Name

Emerald Coast Equities, Inc.

000086461840
01/29/07--01061--003 **2258.75

2. Principal Office Address - No P.O. Box #

6622 East Broad Street

3. Mailing Office Address

Post Office Box 70

Suite, Apt. #, etc.

Suite A

Suite, Apt. #, etc.

City & State

Douglasville, Georgia

City & State

Douglasville, Georgia

Zip

30134

Country

U.S.A.

Zip

30133

Country

U.S.A.

4. Date Incorporated or Qualified
To Do Business in Florida

April 25, 1996

5. FEL Number

59-3380627

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

Douglas L. Smith, Esq.

Street Address (P.O. Box Number is Not Acceptable)

221 McKenzie Avenue

Suite, Apt. #, Etc.

City

Panama City

State

FL

Zip Code

32401

☐ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

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

1/24/07

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
D	George R. Kingston	6622 East Broad Street, Suite A	Douglasville, GA 30134
D	Charles R. Parish, Jr.	91 Hermitage Court	Powder Springs, GA 30127

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 contained in Chapter 119, 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]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

1/17/07

Daytime Phone #

404-806-7729

B. Mitchell JAN 25 2007

202

HARTLEY, ROWE & FOWLER, P.C.

ATTORNEYS AT LAW

DONNA N. CRAWFORD

DIRECT DIAL: 770-852-6562
EMAIL: DCRAWFORD@HRLFLEGAL.COM

6622 EAST BROAD STREET
POST OFFICE BOX 489
DOUGLASVILLE, GEORGIA 30133-0489

TELEPHONE: 770/920-2000
FAX: 770/920-9119

January 18, 2007

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

RE: Application for Reinstatement of Emerald Coast Equities, Inc.

Dear Sir/Madam:

Enclosed please find an Application for Reinstatement for Emerald Coast Equities, Inc. (the "Company"), together with a check for \$2,258.75.

Please reinstate the Company and forward a Certificate of Reinstatement and Certificate of Status to my attention at the address above. I have enclosed a self-addressed, stamped envelope for your convenience.

If you have any questions or need anything further, please do not hesitate to contact me.

Very truly yours,

HARTLEY, ROWE & FOWLER, P.C.



Donna N. Crawford

DNC/llb
Enclosures
cc: Mr. George R. Kingston