

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

AND FILED

99 JAN -4 PM 2:20

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # **P96000073081**

1. Corporation Name

HUNTER'S CONSTRUCTION & PROPERTY MANAGEMENT INC

Principal Place of Business

Mailing Address

4461 MARSHALL STREET
 ORLANDO FL 32811

4461 MARSHALL STREET
 ORLANDO FL 32811



REINSTATEMENT *RB*

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable <i>5354 S. John Young</i>		3. New Mailing Office Address, If Applicable <i>SAME</i>		4. Date Incorporated or Qualified To Do Business in Florida <i>09/04/1996</i>	
Suite, Apt. #, etc. <i>Park Way</i>		Suite, Apt. #, etc.		5. FEI Number APPLIED FOR	
City & State <i>Orlando Fla</i>		City & State		Applied For Not Applicable	
Zip <i>32839</i>	Country <i>Orange</i>	Zip	Country	6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

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

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
D	HUNTER, LORENZO	4461 MARSHALL STREET	ORLANDO FL 32811
D	BRYANT, WILLIE	4461 MARSHALL STREET	ORLANDO FL 32811

500002735745-3
 -01/11/99-01005-002
 *****750.00 *****750.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

HUNTER, LORENZO 4461 MARSHALL STREET ORLANDO FL 32811		Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City State FL Zip Code	
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10. I, 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 *Lorenzo Hunter* **SIGNATURE REQUIRED** Date *12-25-98*
 REGISTERED AGENT MUST SIGN

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)(f), 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 *Lorenzo Hunter* **SIGNATURE REQUIRED** Lorenzo Hunter Date *12-25-98* Daytime Phone # *(407) 592-6173*

CR2EM40 (9/98)