Suite, Apt. #. Etc.  State   Panama City Bch   State	PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.												
DOCUMENT #	[28] E-012 Land			FLOR	Katherine Harris Secretary of State				FILE	D D	J.		
Suite, Apt. 8, etc.  City & State Panama City Bch, FL Panama City Bch Panama City Bch Panama City Bch Richard K. Henry  Street Address (P.O. Box Number is Not Acceptable) 333 [Eagle Drive Panama City Bch Panama City Bch, FL  Steel Address of Each Chrow and for Decotors Officer and for Inchess Correct and Fanama City Bch, FL  Stean Address of Each Chross and City Bch, FL  Stean Address of Each Chross and City Bch, FL  Stean Address of Each Chross and City Bch, FL  Stean Address of Each Chross and City Bch, FL  Stean Address of Each Chross and City Bch, FL  Stean Address of Each Chross and City Bch Chross and City Bch Chross and City Bch Chross and City Bch Chr	1. Corporat	tion Name		MO Const	) ;ructi	SECI TALL	RETARY AHASSEI	of State E. Florida	<b>\</b> .				
City & State Panama City Bch, FL Street Address of Current Registered Agent  7. Name and Address of Current Registered Agent  Panama City Bch Panama City Bch, FL Registered Agent Regist			e Dr	ive	<b>3.</b> Ma	alling Office Addre	le Driv	7e					
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To   Name and Address of Current Registered Agent	Pan	nama C	<del>,</del>		L P	Panama City Bch, FL			5. FEI Numbe	)r		A	pplied For
Name   Richard K. Henry   Street Address (P.O. Box Number is Not Acceptable)   333   Eagle Drive   -08/17/0101076303	324	113	Country	Ís	<b>Zip</b> 32	413	Country US		6.			\$8.75 Additiona	al Fee required
Signature of Registered Agent  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 Officer and/or Directors  Officer and/or Director  Pres Richard K. Henry  333 Eagle Drive  Panama City Bch, FL 32413  10.1 cartify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 807 or 617, F.S. I further cartify 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 118.07(3)(), 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: Richard K. Henry	<b>8.</b> I, being a	Name Richard K. Henry  Street Address (P.O. Box Number is Not Acceptable) 333   Eagle Drive  Suite. Apt. #. Etc.  City Panama City Bch  State  State FL  State  Sta										003	
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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #	this rein: owed by on this a	at all fees n indicated											