PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.						
CORPORAT REINSTATEM	5 Ex. 107-5	Secreta	RTMENT OF STATE ary of State corporations	07 _SE	FILED 7 FEB 14 PM 2: 29 10 REJARY OF STATE	
DOCUMENT # P98000016663 1. Corporation Name				_	CHETARY OF STATE LAMASSEE, FLORIDA	
JERRY D. VANDERHOFF, INC				60 02/19	600088533886 02/19/0701002008 **1050.00	
2. Principal Office Addi 3617 SW 1		3. Mailing Office Address		l re	REINSTATEMENT	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		4. Date Incorporated or Qualified 00/40/4000	
City & State OKEECHOBEE, FL		City & State	City & State		5. FEI Number Applied For	
^{Zip} 34974	PALM BEACH	Zip	Country	6. CERTIFICATE	Not Applicable ## 8.75 Additional Fee require for a Certificate of Status	
	7. Name and Address of	f Current Registered Agr	ent			
	D VANDERH				einstatement fee is imposed, except in astances which the entity did not receive	
	Box Number is Not Acceptable)	3617 SW 13	3TH TER	the pri	the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.	
Suite, Apt. #, Etc.				receive		
OKEECHOBEE State State FL 34974				1		
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 2/10/07						
REGISTERED ACENT AULST SIGN						
9. Names and Street A	Name of		orofit corporations must list at le		<u> </u>	
	Officers and/or Directors Officer and/or Direct			or	City / State / Zip	
D JERR	JERRY D VANDERHOFF 3617 SW 13TH TI			=K	OKEECHOBEE, FL 34974	
·						
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:	Juy D. Von		IRECTOR	2/10/	07 863-357-2005	
	ÁIGMÁZÍIRE ANN TYPEN OR PR'	INTER NAME OF SIGNING OF	OFFICER OR DIRECTOR		Date Daytime Phone #	

C.R. COOPER, CPA, PA

1495 FOREST HILL BLVD STE B WEST PALM BEACH, FLORIDA 33406

American Institute of Certified Public Accountants

Florida Institute of Certified Public Accountants (561) 964-6927 (561) 432-0008 FAX (561) 433-3596 CRCOOPER@CRCCPA.COM WWW.CRCCPA.COM

February 2, 2007

Division of Corporations Uniform Business Report Filings P.O. Box 6327 Tallahassee, Florida 32314

Taxpayer:

JERRY D. VANDERHOFF, INC

FEIN:

Document #: P98000016663

Tax Form:

UBR

Tax Period:

2001, 2002, 2003, 2004, 2005, 2006, 2007

To Whom It May Concern:

We have enclosed check #6236 in the amount of \$1050.00 for the 2007 Corporate Reinstatement of JERRY D. VANDERHOFF, INC., Document # P98000016663.

Please abate the late filing penalty. Mr. Vanderhoff did not receive the original Annual Reports and did not intentionally avoid the filings.

Thank you for your prompt attention to this matter. Please contact our office if any further information or explanation is required.

Respectfully,

CL Com of

C. R. Cooper, CPA

Encl.

bk

IRS CIRCULAR 230 DISCLAIMER: TO ENSURE COMPLIANCE WITH REQUIREMENTS IMPOSED BY THE IRS, WE INFORM YOU THAT ANY U.S. TAX ADVISE CONTAINED IN THIS COMMUNICATION (INCLUDING ATTACHMENTS), UNLESS OTHERWISE SPECIFICALLY STATED, WAS NOT WRITTEN TO BE USED AND CANNOT BE USED FOR THE PURPOSE OF (1) AVOIDING ANY PENALTIES UNDER THE INTERNAL REVENUE CODE OR (2) PROMOTING, MARKETING OR RECOMMENDING TO ANOTHER PARTY ANY TAX-RELATED MATTERS ADDRESSED HEREIN.