

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

02 MAR 14 PM 4:00

**DOCUMENT #** P980000026712

**1. Corporation Name**

Panhandle Paint & Collision, Inc.  
2511 W. Jordan St.  
Pensacola, FL 32505

**2. Principal Office Address**

2511 W. Jordan St.

**3. Mailing Office Address**

2511 W. Jordan St.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Pensacola, FL

City & State

Pensacola, FL

Zip

32505

Country

Zip

32505

Country

**4. Date Incorporated or Qualified  
To Do Business in Florida**

03/20/98

**5. FEI Number**

59-3498795

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

Robert J. Andrews

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

1201 Jacks Branch Rd.

Suite, Apt. #, Etc.

City

Cantonment

State

FL

Zip Code

32533

**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

*Robert J. Andrews*

*Robert J. Andrews*

Date

3-13-02

REGISTERED AGENT MUST SIGN

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

Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
Dir.	Robert J. Andrews	1201 Jacks Branch Rd.	Cantonment, FL 32533
Dir.	Robert E. Yates	127 Paul St.	Pensacola, FL 32505

**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:**

*Robert J. Andrews*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

2-20-02

Daytime Phone #

CR2E081 (9/00)