

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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**CORPORATION
REINSTATEMENT**



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

FILED

01 OCT -8 AM 8:32

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT #

199000036917

1. Corporation Name

The Sign Resource, Inc

2. Principal Office Address

21977 US Hwy 19N

Suite, Apt. #, etc.

City & State

Clearwater, FL

Zip

33765

Country

USA

3. Mailing Office Address

SAME

Suite, Apt. #, etc.

City & State

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

59-3570535

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$5.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

James B. Jackson

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

3916 Bloominghill LN.

Suite, Apt. #, Etc.

City

Palm Harbor

State

FL

Zip Code

34684

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

James B. Jackson
REGISTERED AGENT MUST SIGN

Date 10/4/01

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
President	JAMES B. JACKSON	3916 Bloominghill LN	Palm Harbor, FL 34684

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)(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:

James B. Jackson James B. Jackson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/4/01

Date

727-669-6877

Daytime Phone #

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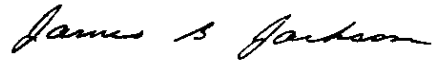
The Sign Resource, Inc.

October 02, 2001

Florida Department of State
Division of Corporations

I am requesting a one time wavier fee to reinstate my corporation, for the following reason; in 1999 I filed for S Corporation status and my address was 855 Dunbar St. Oldsmar, Fl. When I moved that year I notified the local post office for a forwarding address and did not receive the notification from the Division of Corporation, I also did not know I was to notify the division of corporations of my new address . I am enclosing the corporation reinstatement form along with the two years of fees for \$300.00.

My new address is:
The Sign Resource, Inc.
21977 Us Hwy. 19N
Clearwater, Fl. 33765
Phone: 727-669-6877
Fax: 727-669-7536
Thank you very much



James B. Jackson