


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS		APPROVED AND FILED 99 FEB 16 AM 10:58 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
DOCUMENT # S42100					
1. Corporation Name G. B. ROBERTS & ASSOCIATES, INCORPORATED 4001 CONFEDERATE POINT RD STE 2 JACKSONVILLE, FL 32210-5474					
Principal Place of Business		Mailing Address			
G. B. ROBERTS & ASSOCIATES, INCORPORATED 4001 CONFEDERATE POINT RD STE 2 JACKSONVILLE, FL 32210-5474		G. B. ROBERTS & ASSOCIATES, INCORPORATED 4001 CONFEDERATE POINT RD STE 2 JACKSONVILLE, FL 32210-5474			
If above addresses are incorrect in any way, line through incorrect information and enter correction below.					
2. New Principal Office Address, If Applicable 4613 PHILIPS HWY Suite, Apt. #, etc. SUITE 204 City & State JACKSONVILLE, FL Zip 32207 Country USA		3. New Mailing Office Address, If Applicable 4613 PHILIPS HWY. Suite, Apt. #, etc. SUITE 204 City & State JACKSONVILLE, FL Zip 32207 Country USA		4. Date Incorporated or Qualified To Do Business in Florida 3-28-91 5. FEI Number 593060564 Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/>	
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)					
Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip		
	PRESIDENT ROBERTS, GREGORY BAYER	2 TOWNSEND ST #1-1303	SAN FRANCISCO, CA 94107		
	V. PRESIDENT FARNELL, RONALD EDWARD	2371 COUNTING GREEN DR W.	JACKSONVILLE, FL 32224		
				700002777517--3 02/17/99 01016 002 ****900.00 ****900.00 2/16	
8. Name and Address of Current Registered Agent			9. Name and Address of New Registered Agent		
GREGORY B. ROBERTS 4001 CONFEDERATE POINT RD STE 2 JACKSONVILLE FL 32210			Name RONALD E. FARNELL Street Address (P.O. Box Number is Not Acceptable) 4613 PHILIPS HWY Suite, Apt. #, Etc. SUITE 204 City JACKSONVILLE State FL Zip Code 32207		
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 Ronald E. Farnell REGISTERED AGENT MUST SIGN			Date 2-10-99		
11. This corporation owes the current year Intangible Personal Property Tax due June 30. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> (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)(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: Ronald E. Farnell R.E. FARNELL SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date 2-10-99 Daytime Phone # 904-636-0079		