



PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS		FILED 04 JUN 28 AM 10:44 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
DOCUMENT # S91711					
1. Corporation Name Cut Rite Roofing, Inc. 801 26th Street Orlando, FL 32805					
2. Principal Office Address 801 26th Street Suite, Apt. #, etc.			3. Mailing Office Address Orlando, FL 32805 Suite, Apt. #, etc.		
City & State Orlando		City & State Orlando		4. Date Incorporated or Qualified To Do Business in Florida 11/04/1991	
Zip 32805	Country USA	Zip 32819	Country USA	5. FEI Number 650299033	Applied For <input type="checkbox"/> Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>				5875 Additional Fee required for a Certificate of Status	
7. Name and Address of Current Registered Agent					
Name David G. Whipple					
Street Address (P.O. Box Number is Not Acceptable) 7232 Burnway Drive					
Suite, Apt. #, Etc.					
City Orlando				State FL	Zip Code 32819
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0605 or 617.0503, F.S.					
Signature of Registered Agent _____ Date _____					
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 Officers and/or Directors	Street Address of Each Officer and/or Director		City / State / Zip	
Pres	John P. Smith	801 26th Street		Orlando, FL 32805	
VP	David G. Whipple	7232 Burnway Drive		Orlando, FL 32819	
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: 		SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date 6/23/04	Daytime Phone # 907-843-2665

REINSTATEMENT 03-04

200038317712
06/23/04 01050 010 ***000.00

JG/24


GUT RITE ROOFING INC.

7232 Burnway Dr.
ORLANDO FL. 32819
ST. CERT # 039859
◆
Phone (407) 843-2665
Fax (407) 351-8808

- June 23, 2004

To Whom It May Concern,

This letter is in reference to reinstating our corporation. We wrote a letter asking you to change our mailing address as we do not receive mail at 801 26th St Orlando, Fl 32805. The address was not changed and therefore we did not receive our paper work for the 2003 and 2004 fee's. We are requesting that the reinstatement fee be waived if at all possible. I have filled in section #7 on the form stating the new address of 7232 Burnway Dr. , Orlando, Fl 32819. Thank You.

Thank You,


- David Whipple-V. President