

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



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

AND
FILED

00 OCT 10 PM 1:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **F99000000772**

1. Corporation Name

R. G. Darby Company - South

900003446989--1
-11/01/00--01055--016
****750.00 ****750.00

2. Principal Office Address

3521 All American Blvd.

Suite, Apt. #, etc.

City & State

Orlando, FL

Zip

32810

Country

USA

3. Mailing Office Address

1341 W. Mockingbird Lane

Suite, Apt. #, etc.

1200W

City & State

Dallas, TX

Zip

75247

Country

USA

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

2/9/99

5. FEI Number

52-2137145

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

CT Corporation System

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

1200 South Pine Island Road

Suite, Apt. #, Etc.

City

Plantation

State

FL

Zip Code

33324

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

Connie Bryan

CONNIE BRYAN

SPECIAL ASSISTANT SECRETARY

Date

10/10/2000

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
P/S/T/D	Jeff Lee Hull	1341 W. Mockingbird Ln Suite 1200W	Dallas, TX 75247
V	Phil Cocks	3521 All American Blvd	Orlando, FL 32810
V	Cliff Darby	3110 Kendall Drive	Florence, AL 35630

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/4/00

Date

214-630-5757

Daytime Phone #

CR2001 (9/99)