

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

**Katherine Harris**

Secretary of State

DIVISION OF CORPORATIONS

FILED

01 DEC 24 AM 9 45

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P00000013596

**1. Corporation Name**

NATIONAL POOL CONSTRUCTION, INC.

**2. Principal Office Address**

900 N. Federal Highway

Suite, Apt. #, etc.

**City & State**

Stuart, FL 34994

**Zip**

34994

**Country**

Martin

**3. Mailing Office Address**

900 N. Federal Highway

Suite, Apt. #, etc.

**City & State**

Stuart, FL 34994

**Zip**

34994

**Country**

Martin

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

2-08-2000

**5. FEI Number**

22-3710750

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**

Fred Katzman

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

900 N. Federal Highway

**Suite, Apt. #, Etc.**

**City**

Stuart

**State**

FL

**Zip Code**

34994

**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

*Fred Katzman*

REGISTERED AGENT MUST SIGN

Date 12/20/01

**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
CEO/ Scrty	Fred Katzman	900 N. Federal Highway	Stuart, FL 34994

**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:**

*Fred Katzman*

Fred Katzman

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12.20/01

Date

(561) 692-7755

Daytime Phone #

CR2E081 (9/00)

900 N. Federal Hwy.  
Stuart, FL 34994



Tel (561) 692-7755  
Fax (561) 692-7955

December 20, 2001

Florida Department of State  
Division of Corporation  
Attn: Michelle Milligan  
P. O. Box 6327  
Tallahassee, Florida 32314

Re: P00000013596  
2001 Uniform Business Report

In response to your letter dated December 14, 2001 (copy attached) enclosed please find our Corporation Reinstatement form, which contains an address change for Mr. Fred Katzman, the CEO of our corporation.

The original 2001 Uniform Business Report was mailed to you on January 26, 2001, with check #1764 for \$150.00. This check was deposited by the state on January 31, 2001 (see attached). We never knew that there was a problem with the FEI number written on the report, as mail is not delivered to the 4873 SW Golfside Dr., Palm City address. Mr. Katzman was of the understanding that all corporate correspondence went to our registered agent, Sam Steger, Attorney.

Due to the fact that we never received a rejection letter or any correspondence relating to the problems with the 2001 UBR filed, we request that the \$600.00 fee be waived. You already have the 2001 fee of \$150.00.

I appreciate any help that you can give us.

Sincerely,

A handwritten signature in cursive script that reads "Patricia A. Hood".

Patricia A. Hood  
Office Manager

