

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
05 DEC 16 PM 3:59
TALLAHASSEE, FLORIDA

DOCUMENT # 304242

1. Corporation Name

FLORIDA INDUSTRIAL CONSTRUCTION COMPANY

2. Principal Office Address

4106 S. TRAIL 13

Suite, Apt. #, etc.

3. Mailing Office Address

SAME

Suite, Apt. #, etc.

City & State

INVERNESS FL

Zip

34452

Country

CITRUS

City & State

—

Zip

—

Country

—

4. Date Incorporated or Qualified
To Do Business in Florida

4-19-66

5. FEI Number

59-1141096

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

OPIE K. RINGLEY

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

4106 S. TRAIL 13

Suite, Apt. #, Etc.

City

INVERNESS

State

FL

Zip Code

34452

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

Opie K. Ringley

REGISTERED AGENT MUST SIGN

Date 12-12-05

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	OPIE K. RINGLEY	4106 S. TRAIL 13	INVERNESS FL 34452
Sec	WILLIE D. HOWE	5550 SE 195 PLACE	INGLIS FL 34449
TRES	" " "	"	"

000062224750
12/18/05--01024--025 **2550.00

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:

Opie K. Ringley president

12-12-05-352-628-0193

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #