

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



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

FILED

'00 OCT -5 PM 2:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # 317715

1. Corporation Name

BURDETTE COWARD & COMPANY, INC.

100003436481--9  
-10/24/00--01041--016  
\*\*\*\*758.75 \*\*\*\*758.75

2. Principal Office Address

17160 BURNT STORE ROAD

3. Mailing Office Address

17160 BURNT STORE ROAD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

PUNTA GORDA, FL.

City & State

PUNTA GORDA, FL.

Zip

33955

Country

USA

Zip

33955

Country

USA

4. Date Incorporated or Qualified  
To Do Business in Florida

6-12-1967

SP

5. FEI Number

59-1166898

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

BOBBY G. COWARD

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

25121 KIMBERLY COURT

Suite, Apt. #, Etc.

City

PUNTA GORDA

State

FL

Zip Code

33955

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

*Bobby G. Coward*  
REGISTERED AGENT MUST SIGN

Date

9-29-00

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
TSD	MATTHEW G. COWARD	25081 ROLAND LANE	PUNTA GORDA, FL. 33955
VD	LEONARD B. COWARD	17000 BURNT STORE ROAD	PUNTA GORDA, FL. 33955
PD	BOB G. COWARD	25121 KIMBERLY COURT	PUNTA GORDA, FL. 33955

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:

*Leonard B. Coward* LEONARD B. COWARD

9-29-00 (941)639-1626

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #