PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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CORPORATION REINSTATEMENT

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 OCT 17 AM 9:45

DOCUMENT # 355149

1. Corporation Name
Champion Manufacturing, Inc.

REINSTATEMENT 99-00

2. Principal Office Address
1317 Tangelo Isle
Suite, Apt. #, etc
City & State
Fort Lauderdale, FL
Zip 33315 Country USA

3. Mailing Office Address
1317 Tangelo Isle
Suite, Apt. #, etc
City & State
Fort Lauderdale, FL
Zip 33315 Country USA

4. Date Incorporated or Qualified To Do Business in Florida 11/10/69

5. FEI Number 591276274 ☐ 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
Robert C. Swindell
Street Address (P.O. Box Number is Not Acceptable)
1317 Tangelo Isle
Suite, Apt #, Etc
City
Fort Lauderdale
State FL Zip Code 33315

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0303, F.S.
Signature of Registered Agent Robert C Swindell
REGISTERED AGENT MUST SIGN
Date October 16, 2000

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	Robert C. Swindell	1317 Tangelo Isle	Fort Lauderdale, FL 33315
TD	Eleanor C. Swindell	2880 SW Versailles	Stuart, FL 34997
VP	Cynthia L. MacMillian	1400 NE 17 Avenue	Fort Lauderdale, FL

AD

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: Robert C Swindell
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10-16-00 954-316-7040
Date Daytime Phone #

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CR2E041 (5/98)

Florida Department of State

Division of Corporations

Public Access System

Katherine Harris, Secretary of State

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To:
Division of Corporations
Fax Number : (850)922-4004

From:
Account Name : MAY, MEACHAM & DAVELL, P.A.
Account Number : I20000000135
Phone : (954)763-6006
Fax Number : (954)764-5367

CORPORATION REINSTATEMENT

CHAMPION MANUFACTURING, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	$900.00