	PLEASE	READ ALL INST	RUCTIONS	BEFORE	OMPLET	ING THIS FORM.	1052	
	PLICATION FOR			NT OF STATE anis Itate			100	
			ISION OF CONTO	RATIONS		FILED		
DOCUMENT # 408289				-	00 OCT 20 PM 5: 33			
FREDERIC CONSULTING AND INVESTMENT CORPOR					N SECRETARY OF STATE TALLAHASSEE FLORIDA			
Principal Place of Business Mailing Address					-			
FORT MYE US	ICORECOR DLVD. ERS FLORIDA 33919	13141-6 MC Ft Myers I US						
If above addresses are incorrect in any way, line through incorrect information and enter correction 2. New Principal Office Address, If Applicable 3. New Mailing Office Address, If Applicable						orated or Qualified		
Suite, Apt. a	#, etc.	Suite, Apt. #,	Suite, Apt. #, etc.		5. FEI Number	09	07/1972	
City & State	t myevs 1	EL City & State Fort	myers	FL	6.	59-1430864	Not Applicable	
^{Zip} 339	19 Country US	Zip 339/	19 Countr	, ک	-		Additional Fee required r a Certificate of Status	
7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Name of Officers Street Address of Each								
Title(s)				ficer and/or Director				
Р	HOWELL F DAVIS 13141-8 MCGRE			egor Blvd.		FT MYERS FL		
S	CLAIRE A DAVIS 13141-8 MCG			Egor Blvd.		FT MYERS FL		
			id • • • • • • • • • • • • • • • • • • •		4000034579744 -11/09/0001011025 ****150.00 ****150.00		1011025	
						****150,00	****100.00	
]						,	
8. Name and Address of Current Registered Agent					9. Name and Address of New Registered Agent			
AMASON, GUY H JR								
T 3181 MCGREGOR BLVD - → FT MYERS FL 3 3907 ·				Street Address (P.O. Box Number is Not Acceptable) 3992 V///moor LANE SW Suite, Apt. #, Etc.				
				Fort	mye	YS State	Zip Code 33919	
10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. Signature of								
Registered Agent MUST SIGN						Date		
11. 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 PHINTEGRAPHIC OF DISCOURDED TOR DIRECTOR HOWEITE DAVIS Date Daytime Phone #								

2012

Frederic Consulting and Investment Corporation 1366 Eagle Way Fort Myers, FL 33919

October 17, 2000

c

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FI 32314-6327

Gentlemen:

We did not receive the first nor second notice of the annual reports/uniform business reports for 2000.

We received the notice of dissolution this week. We are submitting the application for reinstatement and our check for \$150.

Please review our application and reinstate the corporation.

Sincerely,

Dowall I Davis

Howell F. Davis President

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Enclosures

and a signal