

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

112

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

AND FILED

98 DEC -7 AM 9:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 448971

1. Corporation Name

BROWN FIRE PROTECTION INC

Principal Place of Business

Mailing Address

124 N HIGHWAY 79
PANAMA CITY BCH FL 32413
US

124 NORTH ARNOOLD DR.
PO BOX 9137
PANAMA CITY BEACH FL 32417



If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable		3. New Mailing Office Address, If Applicable		4. Date Incorporated or Qualified To Do Business in Florida	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		03/20/1974	
City & State		City & State		5. FEI Number	
Zip		Zip		59-1521892	
Country		Country		Applied For	
				Not Applicable	
6. CERTIFICATE OF STATUS DESIRED ☐				\$8.75 Additional Fee required for a Certificate of Status	

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

1. Title(s)	2. Name of Officers and/or Directors	3. Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4. City / State / Zip
PD	JARMAN, E. LEE	219 SAN PABLO STREET	PANAMA CITY BCH FL
STD	JARMAN, PAMELA B.	219 SAN PABLO STREET	PANAMA CITY BCH FL

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

JARMAN, E. LEE 219 SAN PABLO STREET PANAMA CITY BEACH FL 32413		Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City State Zip Code	
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10. 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

E. Lee Jarman
SIGNATURE REQUIRED
REGISTERED AGENT MUST SIGN

Date 11-23-98

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30.

Yes ☒ No ☐

(See other side for information on intangible tax.)

12. 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:

PAMELA B. JARMAN
PAMELA B. JARMAN

11/23/98 850-234-2924
Date Daytime Phone #

642

Brown Fire Protection, Inc.
PO Box 9137
Panama City Beach, FL 32417-9137

Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, Florida 32314

November 23, 1998

In reply to: Document # 448971

To Whom It May Concern:

We have made prompt filings over the past 20 years and were surprised by this notice. I realized the mailing address might have resulted in the non-delivery of our application. On too many occasions whenever "Arnold Drive" was listed as our street, our mail was sent to "Arnoldware Drive" in Panama City and rarely received. The similarity in names has caused us many problems in the past. Therefore, we use our post office box for correspondence only and our street address is listed as "Highway 79". Our original application may have been delivered to Panama City, not Panama City Beach, and not forwarded by the recipient.

I am correcting the mailing address to avoid future problems. I was advised by your office to send \$150 with a letter; however, I am enclosing the full \$750.00. If the reinstatement fee can be waived, it would be greatly appreciated.

Thank you for your assistance with this problem.

Respectfully,


Pamela B. Jarman

Enclosure (2)

PJ