

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM AND

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

FILED

98 NOV 18 AM 11:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 479724

1. Corporation Name

BARINEAU AND SONS, INC.

Principal Place of Business

Mailing Address

4808 WOODLANE CIRCLE
TALLAHASSEE FL 32303-6808

4808 WOODLANE CIRCLE
TALLAHASSEE FL 32303-6808

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

REINSTATEMENT 98

4. Date Incorporated or Qualified
To Do Business in Florida

06/26/1975

5. FEI Number

59-1604652

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	BARINEAU, ELBERT L. JR.	1192 COE LANDING	TALLAHASSEE FL
VD	BARINEAU, STANLEY J.	7062 BLUEBERRY HILL DR	TALLAHASSEE FL
			100002696811--4
			-11/25/98--01069--048
			****750.00 ****750.00

8. Name and Address of Current Registered Agent

BROWN, W. KIRK
313 WILLIAMS ST.
SUITE 2
TALLAHASSEE FL

9. Name and Address of New Registered Agent

Name ELBERT L. BARINEAU JR.
Street Address (P.O. Box Number is Not Acceptable)
4808 WOODLANE CIR.
Suite, Apt. #, Etc.

City

State

Zip Code

TALL

FL

32303

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

ELBERT L. BARINEAU JR.

REGISTERED AGENT MUST SIGN

Date

11/16/98

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:

ELBERT L. BARINEAU JR. 11-16-98 850-562-1125

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E040 (9/98)