

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
TAMMIE L. HARRIS
Secretary of State
DIVISION OF CORPORATIONS

FILED
99 AUG 18 PM 2:55

CLERK OF THE STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 502209

1. Corporation Name

East Coast Outdoors, Inc.

Principal Place of Business

Mailing Address

385 S. Yonge St.
Ormond Beach, FL 32174

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

2. New Principal Office Address, If Applicable wa		3. New Mailing Office Address, If Applicable wa		4. Date Incorporated or Qualified To Do Business in Florida 1978	
Suite, Apt. #, etc. wa		Suite, Apt. #, etc. wa		5. FEI Number 59-1799411	
City & State wa		City & State wa		Applied For Not Applicable	
Zip	Country	Zip	Country	6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$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
Pres	Brent Mullins	5937 Trailwood Dr	Port Orange, FL 32127
Secy	Lalton Mullins	5937 Trailwood Dr.	Port Orange, FL 32127

500002968345--0
-08/24/99-01035--005
****465.00 ****465.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Lalton Mullins 5937 Trailwood Dr. Port Orange, FL 32127		Name Sue	
		Street Address (P.O. Box Number is Not Acceptable)	
		Suite, Apt. #, Etc.	
		City	State FL Zip Code

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
Lalton Mullins
REGISTERED AGENT MUST SIGN

Date
8-16-99

11. This corporation owes 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: Lalton Mullins Lalton Mullins 8-16-99 904-672-5003
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E081 (12/98)

East Coast Outdoors

outfitters for snowskiing • fly fishing • camping • hiking
in-line skating • hockey • snowboarding

8-12-99

TO: Fla. Dept. of State Corp. Filing

We did not receive the forms
to file in 97, because of
a change in our address.

Per conversation with Andy Dunlop
the current amt due is 465⁰⁰.

Please reinstate our corporation
thanks

Brent Mullin

Mailed letter to
Division of Corporations
409 East Gaines St.
Tallahassee FL 32399

Sent to
address on first
letter page

Attn:
Andy Dunlop # 1-850-487-6059