PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

FILED
04 FEB 13 AM 9:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION REINSTATEMENT**

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 686433

**1.** Corporation Name
Fergeson, Skipper, Shaw, Keyser, Baron & Tirabassi, P.A.

| **2.** Principal Office Address | | **3.** Mailing Office Address | |
|---|---|---|---|
| 1515 Ringling Blvd. | | P.O. Box 3018 | |
| Suite, Apt. #, etc. 1000 | | Suite, Apt. #, etc. | |
| City & State Sarasota, Florida | | City & State Sarasota, Florida | |
| Zip 34236 | Country USA | Zip 34230 | Country USA |

900027546139
02/13/04--01039--015 **150.00

**4.** Date Incorporated or Qualified To Do Business in Florida 9/1/80

**5.** FEI Number 59-2036204 ☐ 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: Douglas R. Bald

900027546135
01/26/04--01016--018 **70.00

Street Address (P.O. Box Number is Not Acceptable): 1515 Ringling Blvd.

Suite, Apt. #, Etc.: 1000

City: Sarasota | State: FL | Zip Code: 34236

**8.** I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent: Douglas R Bald — Date: 1-15-04
REGISTERED AGENT MUST SIGN

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

| Titles | Name of Officers and/or Directors | Street Address of Each Officer and/or Director | City / State / Zip |
|---|---|---|---|
| D, VP | James O. Fergeson, Jr. | 1515 Ringling Blvd., #1000 | Sarasota, Florida 34236 |
| D, VP | J. Ronald Skipper | 1515 Ringling Blvd., #1000 | Sarasota, Florida 34236 |
| D, VP | Stephen B. Keyser | 1515 Ringling Blvd., #1000 | Sarasota, Florida 34236 |
| D, P | David J. Baron | 1515 Ringling Blvd., #1000 | Sarasota, Florida 34236 |
| D, VP | E. Ralph Tirabassi | 1515 Ringling Blvd., #1000 | Sarasota, Florida 34236 |
| | See Attached | | |

**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:** [signature] — 1/15/04 — 941 952 1400
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #