


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT		FLORIDA DEPARTMENT OF STATE
		Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 767962

1. Corporation Name

THE FLORIDA SOUTHWEST CHAPTER OF THE CONSTRUCTION SPECIFICATION INSTITUTE, INC.

Principal Place of Business	Mailing Address
3627 PROGRESS AVE NAPLES FL 33942 US	3627 PROGRESS AVE NAPLES FL 33942 US

If above addresses are incorrect in any way, line through incorrect address and print correct address.

2. New Principal Office Address, If Applicable IVAR HENNINGSS Suite, Apt. #, etc. 11367 WATERFORD VILLAGE DRIVE City & State FT. MYERS, FL Zip 33913	3. New Mailing Office Address, If Applicable 1846 LIMBERLOS AVE Suite, Apt. #, etc. PORT CHARLOTTE City & State PORT CHARLOTTE, FL Zip 33948
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REINSTATEMENT

4. Date Incorporated or Qualified To Do Business in Florida 04/14/1983
5. FEI Number 53-2402938
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)

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
P	HARRIS, DAVID HENNINGSS, IVAR	3627 PROGRESS AVE 11367 WATERFORD VILLAGE DRIVE	NAPLES FL FT. MYERS FL
VP,	GOLSON, GORDON KISE, KEVIN	20 PATH OF LEON 2105 HYDE PARK STREET	FORT MYERS FL SARASOTA FL
S	BIGOS, JOE	1643 LONG MEADOW RD	FT MYERS FL
T	MURTAGH, LYNN MEYER, SCOTT	4460-2 CAMINO REAL 1846 LIMBERLOS AVE	FT. MYERS FL PORT CHARLOTTE
D	PHILIPS, KEVIN BAYARD HORN	11550 BENTWOOD COURT 1459 CHARLES ROAD	N-FT MYERS FL FT. MYERS
D	SCHULTZ, BERRY JOHN GORNOLD	P.O. BOX 1103 909 SE 47th Ave Suite 204	SANibel FL Cape Coral FL 33904

8. Name and Address of Current Registered Agent

HARRIS, DAVID M
3627 PROGRESS AVE
NAPLES FL 33942

9. Name and Address of New Registered Agent

Name
SCOTT MEYERS
Street Address (P.O. Box Number is Not Acceptable)
1846 LIMBERLOS AVE
Suite, Apt. #, Etc.
City
PORT CHARLOTTE
FL 33948

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
REGISTERED AGENT MUST SIGN

Date: 3/1/99

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: Ivar Hennings
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/1/99
Daytime Phone # 941-561-681

CR2E040 (9/96)