PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1 of 2

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

03 OCT 17 PM 2:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **F02000006085**

1. Corporation Name

TRANSCONTINENTAL SECURITY, INC.

Principal Place of Business	Mailing Address
4367 DOWNTOWNER LOOP N., STE D MOBILE AL 36609	4367 DOWNTOWNER LOOP N., STE D MOBILE AL 36609

REINSTATEMENT 2003

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

4. Date Incorporated or Qualified To Do Business in Florida: 12/06/2002

5. FEI Number: 63-1263647 ☐ 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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
P	MOORE, J. SCOTT	109 PROVIDENCE ST	MOBILE AL 36604
VT	MOORE, MARK C	6474 C- CEDAR BEND CT	MOBILE AL 36609
		900023833069 10/15/03--01087--010 **150.00	

8. Name and Address of Current Registered Agent	9. Name and Address of New Registered Agent
MOORE, BRENT A 124 A - OAD DRIVE EGLIN FL 32542	Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City / State: FL / Zip Code

CR2E040 (7/03)

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. or 617.0505, F.S.

Signature of Registered Agent: SIGNATURE Brent Moore — Date: 10-13-03
REGISTERED AGENT MUST SIGN

11. 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 Mark C. Moore — 10-13-03 — (251) 583-8802
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

2 of 2

Transcontinental Security Inc.
4367 Downtowner Loop N. Ste. D.
Mobile, Alabama 36609
(251) 344-0500

BRINKS HOME SECURITY AUTHORIZED DEALER

To: Dept. of State
Division of Corporations
P.O. Box 6327
Tallahassee, Fl. 32314

Re: Reinstatement Fee

To whom it may concern,

I have enclosed a check for $150.00 for the reinstatement of Transcontinental Security Inc. We did not receive the two prior UBR notices, however we did receive this notice. I hope that this letter is sufficient in waiving the additional charges. I am now aware of the due date to have the information in your office by, so in the future we can have it in on time. Thank you for your time.

Sincerely,

Mark Moore
Vice President