

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1042

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

00 DEC -8 PM 4:44

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # F47350

1. Corporation Name

PRO ELECTRIC OF GAINESVILLE, INC.

Principal Place of Business

Mailing Address

C/O JACKIE OLIVER  
5901 NW 99TH TERRACE  
GAINESVILLE FL 32653  
US

C/O JACKIE OLIVER  
5901 NW 99TH TERRACE  
GAINESVILLE FL 32606

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

2. New Principal Office Address, If Applicable

13377 Southern Precast DR  
Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

13377 Southern Precast DR  
Suite, Apt. #, etc.

4. Date Incorporated or Qualified  
To Do Business in Florida

10/05/1981

5. FEI Number

59-2122471

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status

City & State

Alachua FL

City & State

Alachua FL

Zip

32615

Country

USA

Zip

32615

Country

USA

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	City / State / Zip
DP	OLIVER, JACK	5901 NW 99TH TERR 13377 Southern Precast DR Alachua, FL	GAINESVILLE FL 32606
ST	OLIVER, DIANE	5901 NW 99TH TERRACE 13377 Southern Precast DR	GAINESVILLE FL 32606
V	OLIVER, MICHAEL	5901 NW 99TH TERRACE Same as above	GAINESVILLE FL 32606
ST	CRISALLI, MICHELLE	5901 NW 99TH TERRACE Same as Above	GAINESVILLE FL 32606

600003505746--6  
-12/19/00--01053--008  
\*\*\*\*150.00 \*\*\*\*150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

OLIVER, JACKIE H PRES.

5901 NW 99TH TERR  
GAINESVILLE FL 32653  
5901 NW 99TH TERR  
GAINESVILLE, FL 32653

Name

Street Address (P.O. Box Number is Not Acceptable)

13377 Southern Precast Drive  
Suite, Apt. #, Etc.

City

Alachua

State

FL

Zip Code

32615

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

SIGNATURE REQUIRED

Date

10/16/00

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 REQUIRED

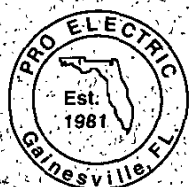
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10/16/00

Daytime Phone #

CR2EC040 (800)



- please Do Not Detach -

- 2 -  
F4 7350

# **PRO Electric Inc.**

October 16, 2000

**To Whom It May Concern:**

We received your notice that we failed to file our 2000 corporation annual report in accordance with Florida statutes. I did some research and discovered we sent a check on 2/8/00 in the amount of \$150.00. We called our bank to double check and the check had not cleared the bank, so we stopped payment on check# 24598 and at this time we are issuing a check and hope that you will be lenient with the reinstatement fee. We have enclosed a copy of the bill payment stub from the first check issued. Any help in this matter would be greatly appreciated.

Sincerely,

Jack H. Oliver  
President