

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. 1082

APPLICATION  
FOR  
REINSTATEMENT



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

DOCUMENT # **G06139**

1. Corporation Name

**GMC HOLDING CORPORATION**

Principal Place of Business

Mailing Address

105 CONCORD DRIVE  
CASSELBERRY FL 32707

105 CONCORD DRIVE  
CASSELBERRY FL 32707

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

10/25/1982

5. FEI Number

59-2502215

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
PD	<del>BRACE</del> BRACE, RICHARD	105 CONCORD DRIVE	CASSELBERRY FL 32707
STD	WEISSBAUM, MARK	10155 COLLINS AVENUE #209	BAL HARBOR FL
D	COOPER, STUART	511 NE 94TH STREET	MIAMI SHORES FL 33138

8. Name and Address of Current Registered Agent

COOPER, STUART  
511 NE 94TH STREET  
MIAMI SHORES FL 33138

9. Name and Address of New Registered Agent

Name **RICHARD D. BRACE**  
Street Address (P.O. Box Number is Not Acceptable)  
**105 CONCORD DR, GMC HOLDING**  
Suite, Apt. #, Etc.  
**#101**  
City **CASSELBERRY** State **FL** Zip Code **32707**

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

**Richard D. Brace**  
REGISTERED AGENT MUST SIGN

Date **11/7/03**

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:

**Richard D. Brace**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**11/8/03** **407-834-9400**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

03 NOV 14 AM 8:00

REINSTATEMENT **03**



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11/14/03--01078--030 \*\*150.00

CR2E040 (7/03)

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# GMC

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*holding corp.*

November 11, 2003

2003UBR

Please be advised that GMC Holding Corp, located at 105 Concord Drive, Suite 101, Casselberry, Florida 32707 never did receive the required documents to complete its annual report forms to maintain its status as an active Florida corporation. We are enclosing a check for \$150.00 for reinstatement along with completed and revised forms. Thank you for your understanding.

Sincerely,



Richard D. Brace  
President