

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FILED

CORPORATION  
REINSTATEMENT



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

02 APR 30 PM 12:22

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # G50235

1. Corporation Name

AAC Electrical Contractors, Inc

2. Principal Office Address

1374 MAZUREK Blvd

Suite, Apt. #, etc.

3. Mailing Office Address

SAME

Suite, Apt. #, etc.

City & State

Pensacola FL

City & State

Zip

32514

Country

Escambia

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

7-19-83

5. FEI Number

59-2298693

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

Lawrence M. LaCoste, Sr.

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

1374 MAZUREK Blvd

Suite, Apt. #, Etc.

City

Pensacola

State

FL

Zip Code

32514

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

*[Signature]*

Date 2-4-02

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
P	L. M. LaCoste, Sr	1374 MAZUREK Blvd	Pensacola, FL 32514
VP	Mary L. LaCoste	1374 MAZUREK Blvd	Pensacola, FL 32514
S/T	L. M. LaCoste, Jr	5040 Potomac Dr	Pace, FL 32571

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]*

2-4-02

Date

850-474-0542

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E081 (9/01)

**Arc Electrical Contractors, Inc**

1374 Mazurek Blvd  
Pensacola FL 32514

Phone 850-474-0542  
Fax 425-969-8209

February 4, 2002

Department of State  
Division of Corporations  
P O Box 6327  
Tallahassee FL 32314

**RE: Reinstatement Application**

Dear Mam/Sir:

Attached you will find my application for reinstatement. I moved the location of the business during December of 2000, and requested all mail to be forwarded to the new address. However, I never received the Uniform Business Report for 2001 or 2002. I request that you accept my application for reinstatement and waive any delinquency fees. Enclosed is a check for \$308.75 to cover fees for 2001, 2002, and a certificate of status for 2002.

If necessary, i can be reached at (850) 474-0542 or (850) 293-5723.

Sincerely,



L. M. LaCoste  
President--Arc Electrical Contractors, Inc