

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.



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

FILED

98 OCT 15 PM 1:21

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

**APPLICATION
 FOR
 REINSTATEMENT**

DOCUMENT # **H40388**

1. Corporation Name

D & E PUMP SALES & SERVICE, INC.

Principal Place of Business

Mailing Address

3833 South Hopkins Avenue
 Titusville, Florida 32780

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

4. Date Incorporated or Qualified To Do Business in Florida

1/30/85

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

59-2523274

Applied For

City & State

City & State

Not Applicable

Zip

Country

Zip

Country

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	2	3	4
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/T/D	Frederick J. Gumieny	3816 Wethersfield Circle	Titusville, FL 32780
S	Daniel E. Gumieny	1997 Alexander Drive	Titusville, FL 32796

500002666865--2
 -10/19/98--01073--009
 ***1050.00 ***1050.00

(Handwritten initials)

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Frederick J. Gumieny
 3816 Wethersfield Circle
 Titusville, Florida 32780

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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

(Handwritten signature of Frederick J. Gumieny)

REGISTERED AGENT MUST SIGN

Date **10-12-98**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(Handwritten signature)

10-12-98

Date

407-268-4132

Daytime Phone #

CF2E040 (1/98)