

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

06 OCT -2 AM 8:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # J06 511

1. Corporation Name

Chase-Builder Corporation

400080360694
10/02/06--01042--004 **150.00

REINSTATEMENT 06

CR2E081 (12/05)

2. Principal Office Address

13101 McGregor Blvd

3. Mailing Office Address

Same

Suite, Apt. #, etc.

#2

Suite, Apt. #, etc.

City & State

Ft. Myers, FL

City & State

Zip 33919

Country

U.S.

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

April 1986

5. FEI Number

59-2715856

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

David B. Bubley

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

13101 McGregor Blvd. (Home Address: 5607 Sundown Harbor Ct)

Suite, Apt. #, Etc.

#2

Ft. Myers, FL 33919

City

Ft. Myers

State

FL

Zip Code

33919

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

David B. Bubley

Date

9-28-06

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
President	David B. Bubley	Office Address 13101 McGregor Blvd. #2	Ft. Myers, FL 33919
		Home Address 5607 Sundown Harbor Ct	Ft. Myers, FL 33919

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 contained in Chapter 119, 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:

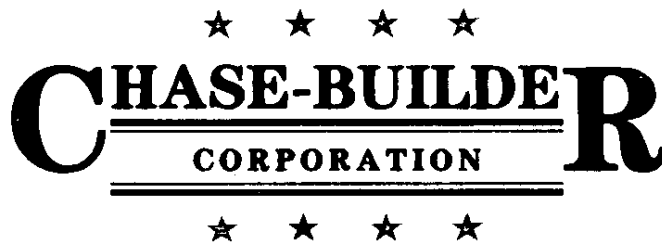
David B. Bubley

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9-28-06 239-482-8247

Date

Daytime Phone #



September 28, 2006

Florida Department of State
Division of Corporations
Annual Report Section
PO Box 6237
Tallahassee, Florida 32314

To Whom It May Concern:

Please note we did not receive the request for our annual report notice, therefore we are filing late. We have included the check along with the form in order for our corporation to be re-instated.

Sincerely,

David B. Bubley