

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

2003-05 Re

FILED

05 AUG 11 PM 4:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Wm 8/12

DOCUMENT # J75818

1. Corporation Name

Lux Associates Architect, Inc.

2. Principal Office Address

1432 51st Ave NE

3. Mailing Office Address

P.O. Box 55637

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

St. Petersburg, FL

City & State

St. Petersburg, FL

Zip

33703

Country

United States

Zip

33732

Country

United States

4. Date Incorporated or Qualified
To Do Business in Florida

10/2/87

5. FEI Number

592833308

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

Richard W. Lux

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

1432 51st Ave NE

Suite, Apt. #, Etc.

City

St. Petersburg

State

FL

Zip Code

33703

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

Richard W. Lux

REGISTERED AGENT MUST SIGN

Date

8/8/2005

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	Richard W. Lux	1432 51st Ave NE	St. Petersburg, FL 33703

200058483022
08/11/05--01041--003 **450.00

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:

Richard W. Lux

Richard W. Lux

8/8/2005

727-522-1972

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (07/06)