PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR 1999 [redacted]

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

99 MAY -7 PM 6:1[illegible]

TALLAHASSEE, FLORIDA

DOCUMENT # K62979

Corporation Name

SULLIVAN CONSTRUCTION AND MAINTENANCE, INC.

Principal Place of Business	Mailing Address
1801 RED RD. CLEWISTON FL 33440	1801 RED RD. CLEWISTON FL 33440

[redacted]

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable
Suite, Apt. #, etc.
City & State
Zip | Country

3. New Mailing Office Address, If Applicable
Suite, Apt. #, etc.
City & State
Zip | Country

4. Date Incorporated or Qualified To Do Business in Florida: 01/30/1989

5. FEI Number: 65-0209959 | 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 (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
PD	SULLIVAN, TONY	1801 RED ROAD	CLEWISTON FL
VST	COMPTON, TERRY E	1801 RED ROAD	CLEWISTON FL 33440
1			

400002880414--0
-05/19/99--01073--008
****158.75 ****158.75

B 5/13/99 99AR

8. Name and Address of Current Registered Agent

COMPTON, TERRY E
1801 RED RD.
CLEWISTON FL 33440

9. Name and Address of New Registered Agent

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: Terry E Compton — REGISTERED AGENT MUST SIGN
Date: 11-12-98

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes [X] No [ ]

(See other side for information on the applicable 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., all fees owed by the corporation have been paid and the names of individuals listed on line four do not qualify for an exception under section 119.07(3)(i), F.S. The information contained on this application is true and accurate and my signature shall have the same legal effect as if made under oath.

Terry E Compton VST — 4-29-99

941-983-3121