


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1022

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

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 DEC 14 PM 3:49

DOCUMENT # K87554

1. Corporation Name

F.A.S. Construction Co., Inc.

2. Principal Office Address

PMB 218, State Road 13 N

Suite, Apt. #, etc.

26

City & State

Jacksonville, FL

Zip

32259

Country

USA

3. Mailing Office Address

PMB 218, State Rd. 13 N

Suite, Apt. #, etc.

26

City & State

Jacksonville, FL

Zip

32259

Country

USA

REINSTATEMENT

13

01

4. Date Incorporated or Qualified
To Do Business in Florida

5/11/89

5. FEI Number

59-2946968

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

Fred E. Davis

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

PMB 218, State Road 13 North

Suite, Apt. #, Etc.

#26

City

Jacksonville

500004744825--8

-12/31/01--01050--024

***750.00 ***750.00

State
FL

Zip Code
32259

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

REGISTERED AGENT MUST SIGN

Date

12-3-01

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/V/S T/D	Fred E. Davis	PMB 218, State Rd. 13 N. #26	Jacksonville, FL 32259

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:

Fred Davis Fred Davis
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

12-3-01

Daytime Phone #

904-287-1030

CR2501 (9/00)

2 of 2

LAW OFFICES

PURCELL, FLANAGAN & HAY, P.A.

1548 LANCASTER TERRACE
JACKSONVILLE, FL 32204

MAILING ADDRESS:
POST OFFICE BOX 40740
JACKSONVILLE, FL 32203

THOMAS K. PURCELL
TIMOTHY L. FLANAGAN
JONATHAN L. HAY
HARRIS L. BONNETTE, JR.
CLARENCE F. FRAZIER
JOHN I. FISHBURNE, III
LINDA R. WICKER

December 12, 2001

TELEPHONE
(904) 355-0355
TELECOPIER
(904) 355-0820
WEBSITE: WWW.JAXTAXLAW.COM

EMAIL
CFRAZIER@JAXTAXLAW.COM

Florida Department of State
Annual Reports Filings
Division of Corporations
P. O. Box 1500
Tallahassee, Florida 32302-1500

Attn: Corporation Reinstatement Department

Re: F.A.S. Construction Co., Inc.

Dear Sir/Madam:

Enclosed please find a corporation reinstatement form for F.A.S. Construction Co., Inc. along with a check made payable to the Department of State for \$750 to cover the costs of filing same.

Should you have any questions, please do not hesitate to contact me.

Sincerely,


Clarence F. Frazier

CFF/slw

Enclosures

c: Mr. Fred E. Davis, F.A.S. Construction Co., Inc.