

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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CORPORATION



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

DIVISION OF CORPORATIONS

01 SEP 28 AM 11:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2001 UBR

DOCUMENT #

K98689

1. Corporation Name

PELCO Properties, INC

2. Principal Office Address

6411 STONE ST TR

Suite, Apt. #, etc.

3. Mailing Office Address

P.O. Box 15457

Suite, Apt. #, etc.

City & State

Tallahassee

City & State

FL, Tallahassee

Zip

32309

Country

USA

Zip

32317

Country

USA

2001 UBR

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

59-2956439

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

John W Pelham

500004625435--0

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

6411 STONE ST TR

-10/05/01-01073-023

****150.00 ****150.00

Suite, Apt. #, Etc.

City

Tallahassee

State
FL

Zip Code

32309

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

John W Pelham

REGISTERED AGENT MUST SIGN

Date

9-28-01

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
PRES	John W Pelham	6411 STONE ST TR	Tallahassee, FL 32309
V.P	Priscilla S. Pelham	6411 Stone ST TR	Tallahassee, FL 32309

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:

John W Pelham

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/28/01 850893-4306

Date

Daytime Phone #

CR2E081 (9/00)

Dear Secretary of State

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My name is John Bellham officer of
PELCO Properties, INC. I did not receive
any notices of annual report. The addresses
are correct. If I received the notices I
would have filed like we did since
1989. I apologize for the delay. My
brother used to handle all this
but he deceased. I am requesting
reinstatement + waiver of penalties
Please.

Thank you
John Bellham
Pres.
PELCO Properties, Inc.
9/28/01