· PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM OVED



## FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

**DIVISION OF CORPORATIONS** 

**DOCUMENT #** 

M45138

1. Corporation Name

BELLINGER CONTRACTORS, INC.

Principal Place of Business

Mailing Address

on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE AND TYPED OF THINTED NAME OF SIGNING OFFICER OR

SIGNATURE:



1996 SEP 23 PM 2: 32

SECRETARY OF STATE TALLAHASSEE, FLORIDA

D NACHERIA BIT BIECH CHECK BICCO MICH (BIA DIGH CHO); CICH CHOIL CHEL CERT IDEL

Dellings VI. 9-19.96 954 370 07/9

DAVIE FL 33325			DAVIE FL 33325					
If above addresses are incorrect in any way, line through incorrect information and enter correction below.  2. New Principal Office Address, If Applicable  3. New Mailing Office Address, If Applicable					Date Incorporated or Qualified     To Do Business in Florida     AM 1/1007			
Suite, Apt. #, etc Suite, Apt. t			l. #, etc.	I, etc.		To Do Business in Florida 01/21/1987		
						5. FEI Number Applied For Applied For		
City & State		City & Sti	City & State		(40( Applicani			
Ζιρ	Country	Zip	Co	untry	1 "	OF STATUS DESIRED	75 Additional Fee required for a Certificate of Status	
7. Names	and Street Addresses of Each Officer a	nd/or Director	Florida nonprofit cor	,		4		
Title(s) 1	Name of Officers and/or Directors ?		3 (Do NO	Street Address of Eac Officer and/or Directo 3 (Do NOT Use Post Office Box		City / State / Zip 4		
P	BELLINGER, KEITH		13541 SW 9TH COURT			DAVIE FL		
VST	BELLINGER, LINDA ANN	13541 SW 9TH COURT			DAVIE FL			
					3	00001977 -10/16/96 ****225.00	70137 01059019 ****225.00	
							of low	
	8. Name and Address of Current Registered Agent					Name and Address of New Registered Agent		
	o, italia and planton of our			Namo		The state of the s		
Bellinger, Keith				Street Address	Streot Address (P.O. Box Number is Not Acceptable)			
	1 SW 9TH COURT		Dala Ast 4 Ea					
DAVIE FL 33325				Suite, Apt. #, Etc.				
				City		State FL	Zip Code	
10. I, being	appointed the registered agent of the	above named c	orporation, am famili	ar with and accept the	obligations of Sect	ion 607.0505, F.S.	Tand	
Signature c Regis <b>if</b> red	Agent /	0000000000	AGENT MUST SIGN	Al Al		Date 9. A.	76	
}			AGENT MUST SIGN					
11. <b>D</b> o De	pes this corporation pay opt. of Revenue under t	/ any inta S. 199.03	ngible tax to 2, Florida St	the tatutes. Yes	s 🗌 No 🗆		de for information ngible tax.)	
	and the second s							
this rein	that I am an officer or director or the re estatement application, the reason for d with a composition have been paid and t	issolution has b	een eliminated, the c	orporate name satisfic	es the requirements	of section 607.0401 or 617.0	401, F.S., that all fees	

Bellinger Contractors Inc. General Contractors 13541 S.W. 9 Court Davle, FL 33325 September 19, 1996 Divisions of Imperations

annual Report Recistational Section

P.O. Box 6327

Tallahassee 12 3234-6327 Ke: Vocument # M 45/38 To Whom it May Concern for \$25.

Inclosed is my Check for May which to replace my check flat in May which apparently, was lost. Upon receiving my apparently, was lost upon receiving my I've notice. I assumed it crossed in (he mail & was purprised to receive a notice of dissolution: That you in leaving any advance for your cooperation in business any reinstatement flee due to circumstances. Time Bulering