

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM FILED

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

02 SEP -6 AM 11:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M95849

1. Corporation Name

CURNELCO, INC.

300007663593--4
-09/11/02--01046--033
***1058.75 ***1058.75

2. Principal Office Address
200 E. Semoran Blvd.

Suite, Apt. #, etc.

City & State
Casselberry, Florida

Zip 32707 **Country** USA

3. Mailing Office Address
7813 Plantation Drive

Suite, Apt. #, etc.

City & State
Orlando, Florida

Zip 32810 **Country** USA

REINSTATEMENT 00-02

**4. Date Incorporated or Qualified
To Do Business in Florida** 1988

5. FEI Number
59-2904403

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

Murray M. Curry

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

7813 Plantation Drive

Suite, Apt. #, Etc.

City
Orlando

State
FL

Zip Code
32810

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**

Murray M. Curry
REGISTERED AGENT MUST SIGN

Date 09/05/2002

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	Curry, Murray M.	7813 Plantation Drive	Orlando, FLorida 32810
S	Nelson, George E.	5381 Leitner Drive E.	Coral Springs, Florida
V	Curry, Christopher R.	1318 W. Portillo Drive	Deltona, Florida
T	Curry, Richard L	592 Shadow Glenn Drive	Winter Springs, Florida

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: Murray M. Curry

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

08/18/2002

Date

407-660-0166

Daytime Phone #

CR2E081 (9/01)