

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

03 OCT 30 AM 10:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N02000004240

1. Corporation Name

Sheriff's Reserve Unit, Inc.

2. Principal Office Address

4700 W. Midway Rd.

Suite, Apt. #, etc.

City & State

Fort Pierce, Florida

Zip

34981

Country

USA

3. Mailing Office Address

c/o E. Rollins Brown II

Suite, Apt. #, etc.

3333 20th Street

City & State

Vero Beach, Florida 32960

Zip

32960

Country

USA

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

06/04/2002

5. FEI Number

☒ Applied For

☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

REINSTATEMENT 03

7. Name and Address of Current Registered Agent

Name

E. Rollins Brown II, Esq.

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

3333 20th Street

Suite, Apt. #, Etc.

City

Vero Beach

State

FL

Zip Code

32960

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

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
D	Vernon D. Smith	1600 South US1	Fort Pierce, Florida 34945
PD	Ed Lounds	Route 8, Box 763-L	Fort Pierce, Florida 33451
VPD	E. Rollins Brown II, Esq.	3333 20th Street	Vero Beach, Florida 32960

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:

E. Rollins Brown II, Esq. Director / V.P.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10-27-03
Date

772-562-8111
Daytime Phone #

CR2E081 (10/02)

21/4

CLEM, POLACKWICH, VOCELLE & BERG, L.L.P.
ATTORNEYS AT LAW

A LIMITED LIABILITY PARTNERSHIP OF
PROFESSIONAL ASSOCIATIONS:

CHESTER CLEM, P.A.[†]
ALAN S. POLACKWICH, SR., P.A.
LOUIS B. VOCELLE, JR., P.A.^{*†}
PAUL R. BERG, P.A.
JANET CARNEY CROOM, P.A.^Δ

E. ROLLINS BROWN, II

ROBERT GOLDEN
OF COUNSEL

3333 - 20TH STREET
VERO BEACH, FLORIDA 32960-2469
TELEPHONE (772) 562-8111
FAX (772) 562-2870
INTERNET www.cpvlaw.com

October 13, 2003

BREVARD COUNTY OFFICE
321 SIXTH AVENUE
INDIALANTIC, FLORIDA 32903
TELEPHONE: (321) 725-3303

PLEASE REPLY TO VERO BEACH

* BOARD CERT. CIVIL TRIAL LAWYER
◊ BOARD CERT. BUSINESS LITIGATION
† CERTIFIED CIVIL MEDIATOR
Δ ALSO ADMITTED IN ARKANSAS

Secretary of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Re: Sheriff's Reserve Unit, Inc.
Document No. N02000004240

Dear Sirs:

As instructed, I write this letter to inform you that our corporation did not receive any annual report paperwork from the Secretary of State. We have just recently noticed that we have been administratively dissolved. Enclosed please find what we believe is the appropriate amount if applicable. However, we are requesting that the fee be waived as we did not receive any of the pertinent documentation.

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

Sincerely,



E. Rollins Brown, II
Vice President, Director, Registered Agent

ERB/jkd

Enclosure

F:\Rollins\CLIENTS\POLACKWICH\RN-B-Miscellaneous\Sheriff's Reserve\10.13.03 ltr to Sec. of State.wpd