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## PLEASE READ-ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

DOCU 1. Corporat Centra Dev 2. Principal 343 W. C Suite, Apl. #,	tion Name  al Florid  veloph  Office Address  Central Av	# N92000000 da Resource ( Ne wt Conv	903 Conserva (CII) Z  3. Mailing Of 343 W. Ce Suite, Apt. #.	ation a	<u> </u>	SECRETARY OF STATUS DESIRED  SECRETARY OF STATUS  **358.75  **358.75  **358.75  **358.75  **358.75  **358.75  **358.75  **358.75  **358.75  **358.75  **358.75  **358.75  **358.75  **358.75  **358.75  **358.75  **36dittonal Fee required for a Certificate of Status  The reinstatement fee is Imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not			
Unit 1 City & State		<u> </u>	Unit 1 City & State						
Lake Wa			Lake Wale	es, FL					
Zip	Country Zip		'	Country		6. \$2.75 Additional Format			
33853		USA	33853	·	USA	CERTIFICATE	for a Certificate of Status		
7. Name and Address of Current Registered Agent  Name  David Hitchcock  Street Address (P.O. Box Number is Not Acceptable)  2016 Seminole Trail  Suite, Apt. #, Etc.  City  Lakeland  State Zip Code  Lakeland  Fil 33803						circumstances which the entity did not receive the prior notices. By checking this box, you			
8- 1, being appointed the registered Spent 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 Date 87476									
—— <u> </u>	and Street Ad	dresses of Each Officer and	d/or Director (Flo	rida nonpro	fit corporations must list at is Street Address of Each	····			
Titles		Officers and/or Directors		Officer and/or Director			City / State / Zip		
Р	David Hitchcock			2016 Seminole Trail			Lakeland, FL 33803		
٧	Silvio Fazzini			101 East Stuart Ave.			Lake Wales, FL 33853		
T/S	Elizabeth Ford			5411 St. Helena Road			Lake Wales, FL 33898		
D	Emie Caldwell			113 Ridge Center Drive			Davenport, FL 33837		
D	Gilbert Bowen			PO Box 218			Haines City, FL 33845		
D Timothy Ford			5411 St. Helena Road			Lake Wales, FL 33898			
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 contained in Chapter 119, F.S. The information indicated on this application is true and accurate, and my signature shall have the same logal effect as if made under oath.  SIGNATURE:									

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## Additional Officers and/or Directors

Titles	Name of Officers and/or Directors	Street Address	City / State / Zip
D	Marty Bowen	PO Box 1819	Winter Haven, FL 33882
D	Jerry Carter	22549 Highway 27 N	Lake Wales, FL 33859