

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 AUG 13 PM 4:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000045811

1. Corporation Name

BOWLIN ELECTRICAL SERVICES INC

2. Principal Office Address

16135 Sperry Lane

Suite, Apt. #, etc.

City & State

UMATILLA, FL

Zip

32784

Country

LAKE

3. Mailing Office Address

PO Box 1113

Suite, Apt. #, etc.

City & State

UMATILLA, FL

Zip

32784

Country

LAKE

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

5. FEI Number

59-3645585

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

BRETT L. SWIGERT, P.A.

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

531 N BAY STREET

Suite, Apt. #, Etc.

City

EUSTIS

State

FL

Zip Code

32726

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
DPT	WARREN S BOWLIN	16135 Sperry Lane	UMATILLA, FL 32784
S	SHEILA R BOWLIN	16135 Sperry Lane	UMATILLA, FL 32784
VP	MART Z BOWLIN	24889 SE 173RD LANE	UMATILLA, FL 32784

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:

W Scott Bowlin

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-23-04 352-267-1574

Date

Daytime Phone #

CR2E081 (01/04)

Bowlin Electrical Services
PO Box 1113
16135 Sperry Lane
Umatilla, FL 32784

April 23, 2004

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

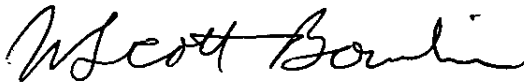
REF: Document # P00000045811
Bowlin Electrical Services, Inc

To Whom It May Concern:

The above referenced corporation did not receive their 2003 For Profit Corporation Annual Report in the mail. We are requesting reinstatement of the above referenced corporation and have enclosed a check in the amount of \$450.00.

Thank you for your assistance with this matter.

Sincerely,

A handwritten signature in black ink, appearing to read "Warren S. Bowlin". The signature is fluid and cursive, with the first name "Warren" being more prominent and the last name "Bowlin" following in a similar style.

Warren S. Bowlin, President
Bowlin Electrical Services, Inc.