

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
04 AUG -9 PM 3: 05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # P00000062394**

1. Corporation Name  
Potter Contracting Inc.

2015 26th St W  
2015 26th St W

2. Principal Office Address  
2015 26th St W

Suite, Apt. #, etc.

City & State  
Bradenton, FL

Zip Country  
34205 USA

3. Mailing Office Address  
2015 26th St W

Suite, Apt. #, etc.

City & State  
Bradenton, FL

Zip Country  
34205 USA

4. Date Incorporated or Qualified  
To Do Business in Florida

5. FEI Number  
65-1020335

☒ Applied For  
☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ \$8.75 Additional Fee required  
for a Certificate of Status

700039358177  
07/21/04--01005--020 \*\*600.00

**7. Name and Address of Current Registered Agent**

Name

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

Suite, Apt. #, Etc.

City

State  
FL

Zip Code

34209

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

8-3-07

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
PSTD	James D. Potter	2015 26th St. W.	Bradenton, FL 34205

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

James D. Potter JAMES D. POTTER 7-13-04

(941)737-1955

CR2E081 (01/04)

POTTER CONTRACTING INC.  
2015 26<sup>TH</sup> ST W  
BRADENTON, FL 34205  
(941) 737-1955

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

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Corporation Reinstatement,

I James D. Potter am debating the request for late fee's to be added to my reinstatement. I am a new Small Business and I was never notified that I had to reinstate my company. Therefore, I wish to have the late fee's waived.

Sincerely,  
James D. Potter

President

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