

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 JUL 29 AM 8:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000082380

1. Corporation Name

COINTEL LEASING, INC.

REINSTATEMENT 01-03

2. Principal Office Address

910 Weedon Drive NE

3. Mailing Office Address

910 Weedon Road

Suite, Apt. #, etc.

NA

Suite, Apt. #, etc.

NA

City & State

St. Petersburg, FL

City & State

St. Petersburg, FL

Zip

33702

Country

USA

Zip

33702

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

08/30/00

5. FEI Number

☒ 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

Rosalie McGuinness

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

910 Weedon Road

Suite, Apt. #, Etc.

na

City

St. Petersburg

State

FL

Zip Code

33702

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

Rosalie McGuinness

Date 07/24/03

REGISTERED AGENT MUST SIGN

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 D	Rosalie McGuinness	910 Weedon Road	St. Petersburg, FL 33702
T D	Rebecca McGuinness	1830-102 Oak Hill East	Clearwater, FL 33764
S D	John J. Connolley	136 NE 19th Court	Ft. Lauderdale, FL 33305

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:

Rosalie McGuinness

Rosalie McGuinness

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

7/24/03

727-579-4369

Daytime Phone #

CR25081 (10/02)