

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

02 DEC 16 PM 3:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P00000108416

1. Corporation Name

Kid City USA INC.

2. Principal Office Address

404 N. Orange Ave

Suite, Apt. #, etc.

City & State

Deland, Florida

Zip

32720

Country

USA

3. Mailing Office Address

404 N. Orange Ave

Suite, Apt. #, etc.

City & State

Deland, Florida

Zip

32720

Country

USA

400009520654
12/16/02--01043--001 **900.00

REINSTATEMENT 01-02

4. Date Incorporated or Qualified
To Do Business in Florida

11/17/2000

5. FEI Number
59-3752331

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

Mark A. Bruner

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

426 W. Minnesota Ave

Suite, Apt. #, Etc.

City

Deland

State
FL

Zip Code

32720

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

Mark A. Bruner
REGISTERED AGENT MUST SIGN

Date

12-12-02

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	Mark A. Bruner	426 W. Minnesota Ave	Deland, Florida 32720
VP	Audrey Bruner	426 W. Minnesota Ave	Deland, Florida 32720
T	Terri Kruczek	4617 Tiffany Woods	Oviedo, Florida 32765

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:

Mark A. Bruner

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

12/12/02 (386) 738-8999

Daytime Phone #

CR2E081 (9/01)