

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P01000033258**

1. Corporation Name

TPC INDUSTRIES, INC.

Principal Place of Business

15708 CARLTON LAKE RD
WIMAUMA FL 33598

Mailing Address

PO BOX 1689
RIVERVIEW FL 33569

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

04/02/2001

5. FEI Number

59-3710443

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status



100024489821

11/06/03--01050--021 **150.00

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
PD	CAMPBELL, TIMOTHY PAUL	15708 CARLTON LAKE RD	WIMAUMA FL 33598

8. Name and Address of Current Registered Agent

CAMPBELL, TIMOTHY PAUL
15708 CARLTON LAKE RD
WIMAUMA FL 33598

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State

FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of
Registered Agent

Timothy Campbell
REGISTERED AGENT MUST SIGN

Date 10-29-03

11. 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:

Timothy Campbell
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10-29-03 813-633-6697

CR25040 (7/03)

TPC INDUSTRIES, INC.

To whom it may concern:

This letter is in reference to the corporation mentioned above, FEI # 59-3710443.

There was no prior correspondence (UBR) before the notice of administrative dissolution or revocation was received regarding the renewal of TPC Industries, Inc. Per the guidelines set out in the "Important Facts" there is a check enclosed for the amount of \$150.00 for the filing fees. If there are any questions regarding this correspondence please contact:

Tim Campbell, President
TPC Industries, Inc.
P.O. box 1689
Riverview, FL 33568
813-633-6697

Thank you.

