

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

02 NOV 20 PM 2:11

DOCUMENT # **PO1000044588**

1. Corporation Name

NORTHWEST FLORIDA ELECTRICAL INC.

2. Principal Office Address

945 GAMBLE ST.

Suite, Apt. #, etc.

City & State

TALLAHASSEE FL

Zip

32310

Country

LEON

3. Mailing Office Address

945 GAMBLE ST.

Suite, Apt. #, etc.

City & State

TALLAHASSEE FL.

Zip

32310

Country

LEON

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

5. FEI Number

59-5719325

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

James White Jr.

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

945 Gamble St 32304

Suite, Apt. #, Etc.

City

Tallahassee Florida

State

FL

Zip Code

32304

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

James White Jr.

REGISTERED AGENT MUST SIGN

Date **11/20/2002**

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
President	JAMES WHITE JR.	945 GAMBLE ST.	TALL. FL. 32310
Vice President	NICKYSON, CLYDE	221 BERMUDE RD.	TALL. FL. 32312
Sec.	GROB RCH	2009 SPADY OAKS PK.	TALL. FL. 32303

600009116306
11/20/02--01076--001 **750.00

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: James White Jr. James WHITE Jr.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/20/2002 224-5372

Date

Daytime Phone #

CR2E081 (9/01)