

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

03 DEC 18 PM 3:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P01000117641

1. Corporation Name

LOYD'S ELECTRIC +
CONSTRUCTION Co.

2. Principal Office Address

275 INDIGO DR #110

Suite, Apt. #, etc.

110

City & State

DAYTONA BEACH, FL

Zip

32114

Country

USA

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Zip

32114

Country

USA

REINSTATEMENT

03

MRD

4. Date Incorporated or Qualified
To Do Business in Florida

12-12-01 EFF 1-1-02

5. FEI Number

81-0639233

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

MERRELL C. LLOYD

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

275 INDIGO DR

Suite, Apt. #, Etc.

#110

City

DAYTONA BEACH, FL

State

FL

Zip Code

32114

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

Merrell C. Lloyd

Date

12/18/03

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	LLOYD, MERRELL	275 INDIGO DRIVE #110	DAYTONA BEACH FLORIDA 32114
V	LLOYD, WILHE MAE	275 INDIGO DRIVE #110	DAYTONA BEACH FLORIDA 32114
ST	LLOYD, CYNTHIA B.	275 INDIGO DRIVE #110	DAYTONA BEACH FLORIDA 32114

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:

CYNTHIA B. LLOYD
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12/18/03 (386) 235-4808
Date Daytime Phone #

SECRETARY/TREASURER

CR2E081 (1/0/02)