

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



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

FILED

03 OCT 17 AM 9:14

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P02000023823

1. Corporation Name

COURTESY AIR & APPLIANCE, INC.

Principal Place of Business

Mailing Address

2 SYCAMORE COURT #105  
WINTER PARK FL 32708

2 SYCAMORE COURT #105  
WINTER PARK FL 32708

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

2. New Principal Office Address, If Applicable

108 KINGSWOOD CT

Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

108 KINGSWOOD CT

Suite, Apt. #, etc.

City & State

SANford FL

Zip

32773

Country

Seminole

City & State

SANford, FL

Zip

32773

Country

Seminole

4. Date Incorporated or Qualified  
To Do Business in Florida

02/27/2002

5. FEI Number

03-040-5977

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status

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

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
D	STUCKEY, WILLIAM A	2 SYCAMORE COURT #105	WINTER PARK FL 32708

REINSTATEMENT

8. Name and Address of Current Registered Agent

STUCKEY, WILLIAM A  
2 SYCAMORE COURT #105  
WINTER PARK FL 32708

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

SIGNATURE REQUIRED  
REGISTERED AGENT MUST SIGN

Date 10-14-03

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10-14-03

Daytime Phone #

407-831-7478

CR2E040 (7/03)

**COURTESY AIR & APPLIANCE, INC.**

108 KINGSWOOD COURT ~ SANFORD, FL 32773  
Phone 407-831-7478

October 13, 2003

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
P. O. BOX 6327  
TALLAHASSEE, FL 32314

RE: APPLICATION FOR REINSTATEMENT OF CORPORATION

Gentlemen:

The Application for Reinstatement that is enclosed was just received October, 8, 2003. We did not receive a 2003 Uniform Business Report and we would like the penalty fee of \$600.00 waived per the instructions that we received when speaking with Tina in your offices on October 9, 2003.


Enclosed is a check for \$150.00 for the Annual Report Fee of \$61.25 and the Corporate Supplemental Fee of \$88.75.

Please note that our address has changed from 628 Sabal Palm Circle, Altamonte Springs, FL 32701-2675 to our new address of 108 Kingswood Court, Sanford, FL 32773. Any future correspondence should be sent to the 108 Kingswood Court, Sanford, FL 32773 address.

Thank you for your help.

Sincerely,

COURTESY AIR & APPLIANCE, INC.

  
William A. Stuckey

Enc: Check # 2115 payable to DEPARTMENT OF STATE, Amount \$150.00