

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 NOV 19 AM 11:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P02000037454**

1. Corporation Name

WHITE KNIGHT CONSTRUCTION INC.

Principal Place of Business

Mailing Address

11477 STRINGFELLOW ROAD
BOKEELIA FL 33922

11477 STRINGFELLOW ROAD
BOKEELIA FL 33922

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

04/05/2002

5. FEI Number

01-0654462

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
P	KING, MICHAEL D	11477 STRINGFELLOW ROAD	BOKEELIA FL 33922
S	KING, GERMAINE	11477 STRINGFELLOW ROAD	BOKEELIA FL 33922

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

KING, MICHAEL D
11477 STRINGFELLOW ROAD
BOKEELIA FL 33922

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

Michael D King
REGISTERED AGENT MUST SIGN

Date 11/11/03

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:

Michael D King
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

11/11/03 239-283-6096

Daytime Phone #

CR2040 (7/03)

WHITE KNIGHT CONSTRUCTION
11477 Stringfellow Rd
Bokeelia, FL 33922

November 11, 2003

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

To Whom It May Concern,

We are a newly incorporated business, which was incorporated in 2003. I did receive a letter from you stating I failed to file the 2003 annual report, therefore my corporation would be revoked.

I did contact your office and explain that I did not realize I was suppose to do this and was told to write this letter and send a check for \$150.00 to reopen my incorporation status.

Please find enclosed check for \$150.00 and if there is anything else please feel free to contact me at 239-283-6096.

Sincerely,



MICHAEL D. KING
PRESIDENT
WHITE KNIGHT CONSTRUCTION