

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

04 FEB -5 PM 12:41

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

DOCUMENT # P02000040183

**1. Corporation Name**

KIRKSEY DEVELOPMENT, INC.

600028412986  
02/09/04--01053--001 \*\*150.00

**2. Principal Office Address**

221 Mooney Road

Suite, Apt. #, etc.

City & State

Fort Walton Beach, FL

Zip

32547

Country

USA

**3. Mailing Office Address**

221 Mooney Road

Suite, Apt. #, etc.

City & State

Fort Walton Beach, FL

Zip

32547

Country

USA

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

April 12, 2002

**5. FEI Number**

030428880

Applied For

Not Applicable

**6. CERTIFICATE OF STATUS DESIRED ☐**

\$8.75 Additional Fee required  
for a Certificate of Status

**REINSTATEMENT** 03-04

**7. Name and Address of Current Registered Agent**

Name

Catherine Kirksey

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

221 Mooney Road

Suite, Apt. #, Etc.

City

Fort Walton Beach

State

FL

Zip Code

32547

600027631046  
01/26/04--01093--032 \*\*750.00

**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

*Catherine Kirksey*  
REGISTERED AGENT MUST SIGN

Date

1-14-04

**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/D	Catherine Kirksey	221 Mooney Road	Fort Walton Beach, FL 32547

**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:

*Catherine Kirksey*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Catherine Kirksey

Date

1-14-04

850-862-5367

Daytime Phone #

CR02081 (10/02)