

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



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

DOCUMENT # P02000061520

1. Corporation Name

CELTIC ASSOCIATES, INC.

Principal Place of Business

Mailing Address

522 WILBUR STREET  
BRANDON FL 33511

522 WILBUR STREET  
BRANDON FL 33511

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

06/03/2002

5. FEI Number

04-3682648

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
PTD	SULLIVAN, JEFFREY A	522 WILBUR STREET	BRANDON FL 33511
VSD	HAIRE, RONALD F	522 WILBUR STREET	BRANDON FL 33511

600024329406  
10/31/03--01026--008 \*\*\*150.00

8. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI FL 33145

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]*

REGISTERED AGENT MUST SIGN

Date

10/27/03

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]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10/27/03

Daytime Phone #

813 5987737

CH2E040 (7/03)

## **CELTIC ASSOCIATES, INC**

522 Wilbur St  
Brandon, FL 33511

To Whom it May Concern,

We are requesting that the reinstatement fee of \$600 be waived due to not receiving the required paper work necessary to stay current. Paper work on this corporation has been sent to both partners addresses in the past. One partner, Ronald Haire, lives in California and the other partner, Jeff Sullivan, lives in Florida. It is possible that there was a miscommunication with the partners responsibility or perhaps even the mailing of the UBR. As of October 27, 2003 Celtic Associates Inc. has not received this form at 522 Wilbur St. Please accept our annual fee of \$150 since we are aware of this cost.

Sincerely,



Jeff Sullivan