

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

W05 000 2635

FILED
05 SEP -9 PM 12:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P020000086203**

1. Corporation Name

SAN DUNN LAUNDRY EQUIP INC
6247 Beach Blvd
Jacksonville FL 32216

2. Principal Office Address

SAME AS ABOVE

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Office Address

SAME AS ABOVE

Suite, Apt. #, etc.

City & State

Zip

Country

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

1987/2002

5. FEI Number

52-2370712

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

**\$8.75 Additional Fee required
for a Certificate of Status**

5/3/04 90733 022 7005 15875

7. Name and Address of Current Registered Agent

Name

HICKS, David Stewart

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

1710 SHADOWOOD LN

Suite, Apt. #, Etc.

#220

City

Jacksonville

State

FL

Zip Code

32207

100058352191
08/08/05--01068--003 **300.00
100058352191
08/08/05--01068--004 **158.75

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

Stewart C Hicks

Date

4-29-05

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
PD	Dunn, Stanley C	6247 Beach Blvd	Jacksonville FL 32216

500059611695
09/14/05--01027--025 **432.50
500059611695
09/14/05--01027--026 **8.75

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 corporation 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:

Stewart C Hicks
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4/28/05 904-724-6922

Daytime Phone #

CR2E081 (01/04)