

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 # P02000086923

1. Corporation Name

BREWSTERS INC.

Principal Place of Business

14003-2 BEACH BLVD.
JACKSONVILLE FL 32250

Mailing Address

1515 4TH ST. NEPTUNE BEACH
NEPTUNE BEACH FL 32266

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

08/12/2002

5. FEI Number

16-1621654

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
PD	BURTON, DAVID C	3875 SOUTH SAN PABLO #1210	JACKSONVILLE FL 32224

900023988339

10/21/03--01148--010 **150.00

8. Name and Address of Current Registered Agent

BURTON, DAVID C
3875 SOUTH SAN PABLO
1210
JACKSONVILLE FL 32224

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

David Burton
REGISTERED AGENT MUST SIGN

Date 10/15/08

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

David Burton, Pres

Date

Daytime Phone #

10/15/03 (904) 223-9850

CR2E040 (7/03)

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

Re: Brewsters, Inc.
Document # P02000086923
EI #16-1621654
Uniform Business Report-2003

Corporation requests that the \$600.00 reinstatement fee be waived for reasonable cause.

The corporation did not receive the original Uniform Business Report. It was not until this form arrived that the company became aware that the annual filing fee, and the report, had not been submitted to the Division of Corporations. Based on this fact, and on the fact that the additional fee will impose an undue financial hardship on the company, request is made to have the late fee waived for reasonable cause. The original filing fee of \$150.00 is enclosed with the signed form.

If you have any questions about the above, or the form, please contact the company directly.

Thank you for your cooperation in this matter.