

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 OCT 24 PM 1:40

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # P02000098789

1. Corporation Name

EJG CONSTRUCTION CO.

Principal Place of Business

1701 BLIND POND AVE
LUTZ FL 33549

Mailing Address

1701 BLIND POND AVE
LUTZ FL 33549

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

2. New Principal Office Address, If Applicable

4617 PARKWAY BLVD
Suite, Apt. #, etc.

City & State

LAND O LAKES FL

Zip

34639

Country

USA

3. New Mailing Office Address, If Applicable

4617 PARKWAY BLVD
Suite, Apt. #, etc.

City & State

LAND O LAKES FL

Zip

34639

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

09/11/2002

5. FEI Number

13-4213235

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	ERIC GIMSON	4617 PARKWAY BLVD	LAND O LAKES FL 34639
V.P.	MELISSA GIMSON	4617 PARKWAY BLVD	LAND O LAKES FL 34639

8. Name and Address of Current Registered Agent

GIMSON, ERIC
1701 BLIND POND AVE
LUTZ FL 33549

9. Name and Address of New Registered Agent

Name

ERIC GIMSON

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

4617 PARKWAY BLVD

Suite, Apt. #, Etc.

City

LAND O LAKES

State

FL

Zip Code

34639

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

REGISTERED AGENT MUST SIGN

Date

10-16-03

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:

ERIC GIMSON

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10-16-03

Date

813598 2439

Daytime Phone #

CR2E040 (7/03)