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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

06 MAR 14 PM 12:51

DOCUMENT # P03000081476

1. Corporation Name

Callahan/Roach Garofalo, Inc.

2. Principal Office Address

111 6th Ave N

3. Mailing Office Address

111 6th Ave N

Suite, Apt. #, etc.

18

Suite, Apt. #, etc.

18

City & State

St. Petersburg, FL

City & State

St. Petersburg, FL

Zip

33701

Country

USA

Zip

33701

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

07/21/2003

5. FEI Number

81-0626226

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

700068111147
03/20/06--01025--030 **450.00

CR2E081 (12/05)

7. Name and Address of Current Registered Agent

Name

Kathleen M. Bickelhaupt, Esquire

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

101 E. Kennedy Boulevard

Suite, Apt. #, Etc.

2800

City

Tampa

State
FL

Zip Code

33602

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

Kathleen M. Bickelhaupt
REGISTERED AGENT MUST SIGN

Date 3/9/06

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
D/P	William M. Callahan	330 8th Ave. N #2	Tierra Verde, FL 33715
D/VP S/T	Alfred R. Roach, Jr.	7712 Weeping Willow Circle	Sarasota, FL 34241
D/VP	John Garofalo	2466 Bering Drive	Houston, TX 77057

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 contained in Chapter 119, 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

Date

3/3/06

Daytime Phone #

927 898 4546



Callahan/Roach & Garofalo
Unlocking the Potential

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Division of Corporations
State of Florida
P.O. 1500
Tallahassee, Florida 32302-1500

RE: Callahan/Roach & Garofalo, Inc.

It has recently come to our attention that our corporation, Callahan/Roach & Garofalo, Inc. was administratively dissolved in 2004 for failure to file the annual report. We are submitting with this letter an application for reinstatement of Callahan/Roach & Garofalo, Inc.

With regard to the reinstatement of Callahan/Roach & Garofalo, Inc., we respectfully request that the Division waive the reinstatement fee. Please be advised that we did not receive the annual report notices in the year of dissolution. We were not aware that we had failed to file our annual report or that our corporation had been administratively dissolved by the Division of Corporations for the failure to file this report.

We regret this oversight and thank you for your consideration of this request.

Sincerely,

Alfred R. Roach, Jr.
Vice- President
Callahan/Roach & Garofalo, Inc.

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SHUMAKER, LOOP & KENDRICK, LLP
ATTORNEYS AT LAW

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ddavis1@slk-law.com

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TAMPA, FLORIDA 33602
(813) 229-7600
FAX (813) 229-1660

OTHER OFFICES:
CHARLOTTE, NC
COLUMBUS, OH
TOLEDO, OH

MAILING ADDRESS:
POST OFFICE BOX 172609
TAMPA, FLORIDA 33672-0609

March 9, 2006

VIA US MAIL, CERTIFIED RETURN RECEIPT

Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Re: Callahan/Roach & Garofalo, Inc.
Our File No. C31770-108721

Dear Sir or Madam:

Enclosed please find the Application for Reinstatement for Callahan/Roach & Garofalo, Inc. with a check in the amount of \$450.00 payable to the Department of State. This amount includes the Annual Report Fee in the aggregate amount of \$183.75 and the Corporate Supplemental Fee in the aggregate amount of \$266.25. A letter of non-receipt is also enclosed for waiver of the Reinstatement Fee of \$600.00.

Please do not hesitate to contact me at 813-227-2276 with any questions. Thank you for your assistance.

Sincerely,



Debra R. Davis
Assistant to Kathleen M. Bickelhaupt

DRD
Enc.