

B1 202

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
05 OCT -6 PM 1:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P03000090201

1. Corporation Name

PATRIOTIC SERVICES INC

2. Principal Office Address

P.O. BOX 1248

Suite, Apt. #, etc.

City & State

PORT RICHEY, FLORIDA

Zip

34673

Country

3. Mailing Office Address

SAME AS #2

Suite, Apt. #, etc.

City & State

SAME AS #2

Zip

#2

Country

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

8-18-03

5. FEI Number

86-1078982

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

WAYNE R MEISSNER

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

P.O. BOX 1248

Suite, Apt. #, Etc.

City

PORT RICHEY

State
FL

Zip Code
34673

600060298256

10/06/05--01039--004 **308 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

Wayne R Meissner
REGISTERED AGENT MUST SIGN

Date **SEPTEMBER 29, 2005**

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
P,T,D	WAYNE R MEISSNER	P.O. BOX 1248	PORT RICHEY FL 34673
S,VP,C	PATRICIA MEISSNE	P.O. BOX 1248	PORT RICHEY FL 34673

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 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:

Wayne R Meissner

WAYNE R MEISSNER PRE

9-29-05

Date

727-643-2041

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E081 (01/05)

PS 2/12

September 29, 2005

Re: Patriotic Services, Inc
Reinstatement

To Whom it May Concern,

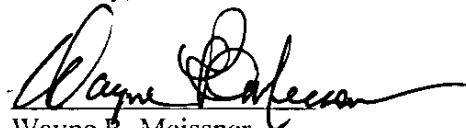
Enclosed please find my reinstatement form as well as a check for \$308.75 to bring my corporation up to date thru 2005 and a certificate of status.

I had not received any renewals since my original filing of the corporation and I had moved and did not know that they would not be forwarded.

Hopefully this letter will reinstate my corporation as well as update my address so I may receive renewals in the future.

Thank you for your time in this matter.

Sincerely,

A handwritten signature in black ink, appearing to read "Wayne R. Meissner", with a long horizontal flourish extending to the right.

Wayne R. Meissner
President