

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P03000119387

1. Corporation Name

Eric Minnick inc.,

FILED

11 JUN -6 AM 9:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT 10-11

CR2E081 (6/10)

2. Principal Office Address - No P.O. Box #

5130 Northwood ct.

Suite, Apt. #, etc.

3. Mailing Office Address

5130 Northwood ct.

Suite, Apt. #, etc.

City & State

N. Ft. Myers FL.

Zip

33917

Country

U.S.

City & State

N. Ft. Myers FL.

Zip

33917

Country

U.S.

4. Date Incorporated or Qualified To Do Business in Florida

12/10/2003

5. FEI Number

522416869

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

Eric Minnick

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

5130 Northwood ct.

Suite, Apt. #, Etc.

City

North Fort Myers FL.

State

FL

Zip Code

33917

500208516015
06/06/11--01050--010 **\$900.00

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

Eric Minnick

REGISTERED AGENT MUST SIGN

Date

5/23/2011

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
<u>D</u>	<u>Adam watkins</u>	<u>242 W Mariana</u>	<u>North Fort Myers FL. 33903</u>
<u>T</u>	<u>Brandon minnick</u>	<u>8085 cook dr.</u>	<u>North Fort Myers FL. 33917</u>
<u>P</u>	<u>Eric minnick</u>	<u>5130 Northwood ct.</u>	<u>N. Ft. Myers FL. 33917</u>

10. E-mail Address: shastadogfarm@comcast.net

(To be used for future annual report notification)

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. I further certify, 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 Minnick Eric Minnick

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

5/23/2011 ⁽²³⁷⁾ 940-6952

Daytime Phone #