

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
05 FEB -2 PM 2:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P03000150804

1. Corporation Name

F. W. SWANTON, INC

1510 NORFOLK STREET NORTH

1510

2. Principal Office Address

1510 NORFOLK STREET NORTH

3. Mailing Office Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

ST. PETERSBURG, FLORIDA

City & State

Zip

33710

Country

.PINELLAS

Zip

Country

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

JAN 01, 2004

5. - FEI Number

.54-2135421

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

F. W. SWANTON

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

1410 NORFOLK STREET NORTH

Suite, Apt. #, Etc.

City

ST. PETERSBURG

State

FL

Zip Code

33710

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

Francis J. Swanton
REGISTERED AGENT MUST SIGN

Date

1/12/05

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 |
|--------|--------------------------------------|---|-------------------------|
| PRES. | F. W. SWANTON | 1510 NORFOLK STREET NORTH | ST PETERSBURG, FL 33710 |
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02/10/05--01003--011 **150.00

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02/10/05--01009--021 **150.00

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:

Francis J. Swanton
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Francis J. Swanton

Date

Daytime Phone #

1/12/05 (727) 422-1861