

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

09 MAR -6 PM 1:04

DOCUMENT # P04000135125

1. Corporation Name

Scott Security Services Inc

2. Principal Office Address - No P.O. Box #  
507 Still Forest terrace

Suite, Apt. #, etc.

City & State  
Sanford, Florida

Zip  
32771

Country  
USA

3. Mailing Office Address  
507 Still Forest terrace

Suite, Apt. #, etc.

City & State  
Sanford, Florida

Zip  
32771

Country  
USA

4. Date Incorporated or Qualified  
To Do Business in Florida

9/27/2004

5. FEI Number

593525088

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

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

Suite, Apt. #, Etc.

City

State

Zip Code

Caroline Scott

507 Still Forest terrace

Sanford

FL

32771

☒ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

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

Caroline Y. Scott

REGISTERED AGENT MUST SIGN

Caroline Y. Scott

Date

3/1/9

**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
COO	Willie J Scott	507 Still Forest terrace	Sanford, Florida 32771
CEO	Caroline Scott	507 Still Forest terrace	Sanford, Florida 32771
VP	Kyle Scott	507 Still Forest terrace	Sanford, Florida 32771
VP	Jordan Scott	507 Still Forest terrace	Sanford, Florida 32771
REINSTATEMENT 67-09 300143409853 02/11/09--01039--006 **450.00			

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 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:

Caroline Y. Scott

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02/11/2009

Date

407-302-7287

Daytime Phone #