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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

09 OCT 28 AM 9:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 205169

1. Corporation Name

Cable Consultants, Incorporated

REINSTATEMENT 06-09

CR2E081 (1/07)

2. Principal Office Address - No P.O. Box # 148 Park South Court		3. Mailing Office Address 148 Park South Court	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Nashville TN		City & State Nashville TN	
Zip 37210	Country	Zip 37210	Country

4. Date Incorporated or Qualified To Do Business in Florida 3/4/1985	
5. FEI Number 581414437	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 C T Corporation System			
Street Address (P.O. Box Number is Not Acceptable) 1200 South Pine Island Road			
Suite, Apt. #, Etc.			
City Plantation	State FL	Zip Code 33324	

☐ 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 Terence Hardley Asst. Secretary
REGISTERED AGENT MUST SIGN

Date 10/23/2009

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
PR	Frank G. Porter	148 Park South Court	Nashville, TN 37210
VP	Mark J. Neel	148 Park South Court	Nashville, TN 37210
VP	Scott D. Burr	148 Park South Court	Nashville, TN 37210
AS	Patricia K. Harris	148 Park South Court	Nashville, TN 37210
DIR	Frank G. Porter	148 Park South Court	Nashville, TN 37210
			10/10/28

10. I certify that I am an officer or director of 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 118, 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: Patricia K. Harris Patricia K. Harris
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10-19-2009

Date

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Florida Department of State
Division of Corporations
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Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5368

Please
file 1st
Thank you

CORPORATION REINSTATEMENT

CABLE CONSULTANTS, INCORPORATED

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$1,200.00

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Corporate Filing Menu

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