

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

192

**APPLICATION
FOR
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000018672

1. Corporation Name

GANDY COASTAL, INC.

Principal Place of Business

4101 GANDY BLVD
TAMPA FL 33611

Mailing Address

4101 GANDY BLVD
TAMPA FL 33611

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

03/11/1993

5. FEI Number

59-3164269

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
PD	KEFALAS, THEODORE	4101 GANDY BLVD	TAMPA FL 33611
SD	KEFALAS, KOSTA	4101 W. GANDY BLVD.	TAMPA FL 33611

3000003499673--3
-12/13/00--01065--005
****150.00 ****150.00

SP

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

KEFALAS, THEODORE
4101 GANDY BLVD
TAMPA FL 33611

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent

SIGNATURE REQUIRED

Date

REGISTERED AGENT MUST SIGN

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 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:

Theodore Kefalas
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11-21-00

Date

813-839-9245

Daytime Phone #

CR2ED40 (9/00)

P43-18672

Pg. 2/2

NOW 2 LOCATIONS TO SERVE YOU

CLEARWATER AUTOMOTIVE

115 S. Greenwood Ave.
Clearwater, FL 33756
727-449-1111
800-543-1111
FAX 727-442-5250



1333 Starkey Road
Largo, FL 33771
727-536-1111
888-902-1212
FAX 727-536-3662

11-21-00

I never received
A Bill. to renew
my corporation.

AS soon as i received
the bill. i sent
it out.

Thank you

813-839-9245 Theodore Kefalas

THEODORE KEFALAS
GANDY COASTAL INC
4101 W GANDY
TAMPA FL 33611

Professionals in Auto Salvage for over 30 years