

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPROVED  
FILED

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

98 DEC -1 PM 4:09

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P93000035475

1. Corporation Name

C & AQUACULTURE SERVICES, INC.

Principal Place of Business

12685 W. CHECKERBERRY DR.  
CRYSTAL RIVER FL 34428

Mailing Address

POST OFFICE BOX 2019  
CRYSTAL RIVER FL 34423  
US

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

4. Date Incorporated or Qualified  
To Do Business in Florida

05/13/1993

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

59-3184686

Applied For

Not Appliab

City & State

City & State

Zip

Country

Zip

Country

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee requ  
for a Certificate of Statu

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 (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
PST	CLIFFORD, HENRY C.	12685 W. CHECKERBERRY DR.	CRYSTAL RIVER FL 34428
V	COOK, HARRY L.	12685 W. CHECKERBERRY DR.	CRYSTAL RIVER FL 34428

4000002703464--0  
12/04/98--01078--013  
\*\*\*750.00 \*\*\*750.00

11/30/98

8. Name and Address of Current Registered Agent

ABBOTT, GLEN C.  
706 N SUNCOAST BLVD  
CRYSTAL RIVER FL 34429

9. Name and Address of New Registered Agent

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

REGISTERED AGENT MUST SIGN

Date

11-30-98

11. This corporation owes or has paid the current year  
Intangible Personal Property tax due June 30.

Yes ☒ No ☐

(See other side for information  
on intangible tax.)

12. 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.

Glen C. Clifford

352/795-5699

11/30/98