

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 NOV 14 AM 8:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000080699

1. Corporation Name

GRIFFITH ELECTRICAL CONSULTING INC.

Principal Place of Business

% RICHARD D. GRIFFITH
10367 TYSON RD
ORLANDO FL 32832

Mailing Address

% RICHARD D. GRIFFITH
10367 TYSON RD
ORLANDO FL 32832

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

11/17/1993

5. FEI Number

59-3212326

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
D	GRIFFITH, ELIZABETH A	10367 TYSON RD	ORLANDO FL
D	GRIFFITH, RICHARD D	10367 TYSON ROAD	ORLANDO FL 32832

700024633327
11/13/03--01023--006 **150.00

8. Name and Address of Current Registered Agent

GRIFFITH, RICHARD D
10367 TYSON RD
ORLANDO FL 32832

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. or 617.0505, F.S.

Signature of
Registered Agent

Richard D. Griffith
REGISTERED AGENT MUST SIGN

Date 15 OCT 03.

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:

Richard D. Griffith
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

15 OCT 03.

Daytime Phone #

CR20040 (7/03)

2282

FLORIDA DEPARTMENT OF STATE

SUBJECT: REINSTATEMENT FEE

PLEASE EXCEPT THE FILING FEE OF \$150.00 AND WAVE THE PENALTY, I
DID NOT RECEIVE THE PRIOR UBR NOTICES.

THANK YOU



RICHARD D. GRIFFITH
PRESIDENT

GRIFFITH ELECTRICAL CONSULTING INC.