

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT
P94000056005
FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
Division of Corporations

FILED
99 SEP 17 AM 11:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000056005

1 Corporation Name

Corporate Public Relations, Inc.

Principal Place of Business

Mailing Address

207 Jasmine Lane
Longwood, FL 32779

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

7/27/94

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5 FEI Number

☒ Applied For

☐ Not Applicable

City & State

City & State

Zip

Country

Zip

Country

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 Titles	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	Roy Meadows	207 Jasmine Lane	Longwood, FL 32779

REINSTATEMENT 95-99

LFJ
9-20-99

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-09/20/99--01014--014

***1385.00 ***1350.00

8 Name and Address of Current Registered Agent

9 Name and Address of New Registered Agent

Roy Meadows
207 Jasmine Lane
Longwood, FL 32779

Name

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

Suite, Apt. #, Etc.

City

State Zip Code

FL

10 I, being duly sworn, 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
Roy Meadows

REGISTERED AGENT MUST SIGN

Date

8/16/99

11. This corporation owes the current year
Intangible Personal Property Tax due June 30.

Yes ☐ No ☒

(See other side for information
on intangible tax.)

This document is a public record and may be subject to public inspection. The undersigned hereby certifies that the information provided in this application is true and accurate, and that the corporation has been organized in accordance with the provisions of the Florida Statutes. The undersigned also certifies that the corporation has been organized in accordance with the provisions of the Florida Statutes, and that the corporation has been organized in accordance with the provisions of the Florida Statutes.

SIGNATURE:

Roy Meadows (Roy Meadows)
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/16/99

Date

407-788-2871

Telephone Number