PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPLICATION FOR REINSTATEMENT

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 JUN 26 AM 10:18

DOCUMENT # P94000079593

1. Corporation Name

6805 DEVELOPMENT, INC.

Principal Place of Business	Mailing Address
6805 Adamo Drive Tampa, Florida 33609	100 Second Ave. S. Suite, 704 St. Petersburg, FL 33701

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

REINSTATEMENT 98-00

2. New Principal Office Address, If Applicable	3. New Mailing Office Address, If Applicable	4. Date Incorporated or Qualified To Do Business in Florida
*	2309 N. Dale Mabry Hwy.	10/26/94
Suite, Apt. #, etc. *	Suite, Apt #, etc. *	
City & State *	City & State Tampa, FL	
Zip * / Country *	Zip 33607-2548 / Country U.S.	

5. FEI Number		
59-3280677	*	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)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City/State/Zip
PSTD	Kleinhans, James	2309 N. Dale Mabry Hwy	Tampa, FL 33607-2548
*	*	*	*

8. Name and Address of Current Registered Agent

*
Gibbs, B. Gray
100 2nd Ave. South
Suite 704
St. Petersburg, FL 33701
*
*

9. Name and Address of New Registered Agent

Name
Randolph J. Wolfe

Street Address (P.O. Box Number is Not Acceptable)
201 N. Franklin St.

00000321470--1
-07/13/00--01002--020
***1050.00 ***1050.00

Suite, Apt. #, Etc.
Suite 2200

City: Tampa | State: FL | Zip Code: 33602

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: Randolph J. Wolfe — RANDOLPH J. WOLFE, Registered Agent — Date: April 17, 2000
REGISTERED AGENT MUST SIGN

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.

SIGNATURE: F. [illegible] Kleinhans / President — 4/20/00 — 813-873-0014
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

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