

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

02 DEC 30 AM 9:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000015323

1. Corporation Name

COOPER, BARNETTE & PAGE OF FLORIDA, INC.

REINSTATEMENT 02

300009734923
12/30/02--01030--011 **750.00

2. Principal Office Address

2900 OLD SCENIC HWY 98

Suite, Apt. #, etc.

#407 CRYSTAL DUNES

City & State

DESTIN, FL.

Zip

32541

Country

3. Mailing Office Address

1928 EXECUTIVE PARK DR.

Suite, Apt. #, etc.

City & State

STATHAM, GA

Zip

30666

Country

4. Date Incorporated or Qualified
To Do Business in Florida

2-23-95

5. FEI Number

59-3353587

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

RONALD G. COOPER

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

2900 OLD SCENIC 98

Apt #407

Suite, Apt. #, Etc.

CRYSTAL DUNES

City

DESTIN

State
FL

Zip Code

32541

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Ronald Cooper

Date 12-23-02

REGISTERED AGENT MUST SIGN

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

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
DC	Lewis J. Cooper	1928 EXECUTIVE PARK DR.	STATHAM, GA. 30666
DP	Ronald G. Cooper	2900 OLD SCENIC HWY 98	DESTIN, FL. 32541
DS	R. LARRY BARNETTE	1928 EXECUTIVE PARK DR.	STATHAM, GA. 30666
DV	Bruce PAGE	1928 EXECUTIVE PARK DR.	STATHAM, GA. 30666

10. 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:

Ronald Cooper
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12-23-02

Date

770-725-7400

Daytime Phone #

CR2E081 (9/01)

js 1/2