

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

05 AUG 16 AM 9:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000027620

1. Corporation Name

Girard Construction Inc

REINSTATEMENT 03-05

600058700136

08/17/05--01047--001 **1050.00

2. Principal Office Address

6767 N. Wickham Rd

3. Mailing Office Address

6767 N. Wickham Rd

Suite, Apt. #, etc.

Suite 500

Suite, Apt. #, etc.

Suite 500

City & State

Melbourne FL

City & State

Melbourne FL

Zip

32940

Country

USA

Zip

32940

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

3/29/1995

5. FEI Number

59-3305203

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

Gregory T. Girard

Street Address (P.O. Box Numbers Not Acceptable)

6767 N. Wickham Road

Suite, Apt. #, Etc.

Suite 500

City

Melbourne

State

FL

Zip Code

32940

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

Greg Girard

REGISTERED AGENT MUST SIGN

Date

8/16/05

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
P	Girard, Gregory T	6767 N. Wickham Rd	Melbourne FL 32940
V	Girard, Susan	6767 N. Wickham Rd	Melbourne FL 32940

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:

Greg Girard Pres.

8/16/05

Date

Daytime Phone #

Gregory Girard

CR2E081 (01/05)