

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P95000028321

1. Corporation Name

RSRP, INC.

Principal Place of Business

2101 NE Jacksonville Rd.
Ocala, FL 34470

Mailing Address

2040 NE 39th Street
Ocala, FL 34479

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

2040 NE 39th Street

Ocala, FL

34479

USA

4. Date incorporated or Qualified
To Do Business in Florida

04/10/1995

5. FEI Number

59-3304671

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)

| 1. Title(s) | 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 |
|-------------|--------------------------------------|--|-----------------------|
| D | Eric R. Williams, III | 2040 NE 39th Street | Ocala, FL 34479 |
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-11/02/99-01098-019
***1200.00 ***1200.00

8. Name and Address of Current Registered Agent

Joseph G. Vorwerk
2101 NE Jacksonville Road
Ocala, FL 34470

9. Name and Address of New Registered Agent

Name
John H. Latshaw, Jr.
Street Address (P.O. Box Number is Not Acceptable)
Patterson Bond & Latshaw, P. A.
Suite, Apt. #, Etc.
3010 South Third Street
City
Jacksonville Beach
State
FL
Zip Code
32250

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

REGISTERED AGENT MUST SIGN

Date

10/26/99

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

Yes ☒ No ☐

(See other side for information
on Intangible tax.)

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:

Eric R. Williams, III

10/26/99

(904) 622-7066

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED

99 OCT-29 AM 11:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT 9/10-99

CR2001 (12/98)