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## **APPLICATION FOR**



## FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

REINSTATEMENT	Secretary of S DIVISION OF CORPOR	RATIONS	FILE			
DOCUMENT # P95000040601			E NOV 12	AH 11: 05		
1. Corporation Name			D NOT 10	OF STATE		
CDR ENTERPRI	ISES, INC.	Ţ	ECRETARY ALLAHASSI	OF STATE EE, FLORIDA		
Principal Place of Business	Mailing Address	<del></del>				395 2.31
901 N. Lake Destiny Drive	901 N. Lake Destin	y Drive				
Suite 148 Maitland. FL 32751	Suite 148 Maitland, FL 3275					
maitiand, FL 32/31	Maitland, FL 3275	· 1	<b></b>		PO1 -	9
If above addresses are incorrect in any way, line thro			EINSI	ALLMEN	40	
2. New Principal Office Address. Il Applicable 3. New Mailing Address Il Applicable 1281 N. Lake Sybelia Drive 1281 N. Lake Sybelia		ia Drive	4. Date Incorpo To Do Busin	rated or Qualified ess in Florida	/os	
Suite, Apt. #, etc.	Suits, Apt. W, etc.		U5/18/95			
City & State	City & State City & State		-		Applied For Not Applicable	- 1
Maitland, FL 32751	51 Maitland, FL 3275		6.			
32751 County	<sup>26</sup> 32751 County	*5	CERTIFICATE	OF STATUS DESIRED		
7. Names and Street Addresses of Each Officer and/o			st 3 directors)		<del></del>	
Title(s) Name of Officers and/or Directors 2	l Off	Street Address of Each Officer and/or Director 3 (Do NOT Use Post Office Box N		City / S	itate / Zip	
Russell, Douglas R. 1281 N. I		ke Sybelia	Drive Maitland FL 32751		2751	
P/S/T/ Russell, Douglas R.	1281 N. La	ke Sybelia	Drive	Maitland FL 3	2751	
			O	0000200	8800 <u>-</u> -1	
					-01162015 <del>0 ****375.00</del>	
				$\epsilon$	78/11/5/al	
8. Name and Address of Current Registered Agent			9. Name and Address of New Registered Agent			
Deglomine, Anthony III		Name Russell, I	Douglas R			CR2E040 (12/05
800 North Magnolia Avenue	Street Address (P.O. Box Number is Not Acceptable)				8	
Suite 1500 Orlando FL 32803	1281 N. Lake Sybelia Drive Suite, Apt. #, Etc.				8	
		Maitland		Stat FL	Zip G02751	
10. I, being appointed the register apply of the ab-	e hamed corporation, am familiar wi	th and accept the ob	ligations of Section		la.	A
Registered Agent	SISTERED AGENT MUST SIGN		<del></del>	Date 11/7	176	
11. Does this corporation pay at Dept. of Revenue under S. 1	ny intangible tax to th	e utes. Yes		(See other si	ide for information ingible tax.)	4
•	,		<b></b>		•	
12. I do hereby certify that the Information supplied will lease the Division of Corporations from any liability certify that I am an officer or director or the recent this reinstatement application the reason for disso fees owed by the corporation have been paid. The under oath.	er or trustee empowered to execute flution has been eliminated, the con	i this application as p porate name satisfie	provided for in ch a the requirement	apter 607 or 617, F.S. I turt ts of aection 607.0401 or 6	her certify that when Ming 17.0401, F.S., and that air	
SIGNATURE: BIGHATURE AND TYPED OR PRI	TED HAME OF BIGHING OFFICER OR I	RELISITELL,	Pres.	V 11/7/96 (	407) 425 -4161 Deyline Phone 8	