

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



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

FILED

02 JUN 11 PM 3:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000043598

1. Corporation Name

Brown & Livingston Enterprises, Inc.

2. Principal Office Address

550 N. Reo Street

3. Mailing Office Address

same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Ste. 300

City & State

City & State

Tampa, FL

Zip

Country

Zip

Country

33609

USA

**4. Date Incorporated or Qualified
To Do Business in Florida**

6/6/95

5. FEI Number

59-3328064

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

Peter T. Kirkwood

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

601 Bayshore Blvd.

Suite, Apt. #, Etc.

Ste. 700

City

Tampa

State

FL

Zip Code

33606

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

Peter T. Kirkwood

REGISTERED AGENT MUST SIGN

Date 6/7/02

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
D	Brown, Richard J.	550 N. Reo Street, Ste. 300	Tampa, FL 33609
D	Livingston, James R.	550 N. Reo Street, Ste. 300	Tampa, FL 33609
			900.00-Adm
			61.25-ARL
			88.75-ARSA
			8.75-Cert

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:

Richard J. Brown

Richard J. Brown, President

6/7/02

813/261-5126

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (9/01)