

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



99-024AR
FLORIDA DEPARTMENT OF STATE
Kathleen Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Nov 26, 2002 8:00 A.
Secretary of State

DOCUMENT # P95000056517

1. Corporation Name

Perfect Turner Company

2. Principal Office Address

950 SE Monterey Road
Suite, Apt. #, etc.

3. Mailing Office Address

950 SE Monterey Road
Suite, Apt. #, etc.

City & State

Stuart FL

Zip Country

34994 USA

City & State

Stuart FL

Zip Country

34994 USA

4. Date Incorporated or Qualified
To Do Business in Florida

1995

5. FEI Number

65-0599314

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

Clark E. Collins

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

950 SE Monterey Road

Suite, Apt. #, Etc.

City

Stuart

State

FL

Zip Code

34994

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

Clark E. Collins

REGISTERED AGENT MUST SIGN

Date 10/25/2002

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
Pres	Clark E. Collins	950 SE. Monterey Road Stuart, FL 34994	Stuart, FL 34994

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:

Clark E. Collins

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/25/2002

Date

Daytime Phone #

CR2E081 (9/01)

Perfect Putter Company
950 S. E. Monterey Road
Stuart, FL 34994

November 15, 2002

Department of State
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

Att: Andy Dunlap

Re: Perfect Putter Company
Federal I. D. 65-0599314
Letter Number 302A00060559

Dear Mr. Dunlap:

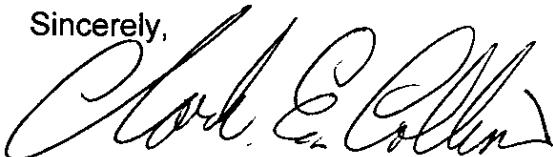
This letter is in response to your letter dated November 7, 2002.

To clarify, we never received the initial reports for 1999, 2000, 2001 or 2002. As stated in my letter of October 25, 2002, the address was not correct. We believe the mail was never forwarded.

Please expedite the reinstatement.

Thank you for your assistance in this matter. If you need to contact me, please call 772-219-3600.

Sincerely,



Clark E. Collins
President