

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

96 OCT 30 PM 2:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P95000093792**

1. Corporation Name
EAST COAST CONSTRUCTION CLEAN-UP & HAULING, INC

Principal Place of Business

Mailing Address

~~600 SOUTH HOPKINS AVE
TITUSVILLE FL 32780~~

~~600 SOUTH HOPKINS AVE
TITUSVILLE FL 32780~~



300001997273--3

-11/06/96--01025--010

***375.00 ***375.00

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable
3985 RICHY ROAD
Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable
3985 RICHY ROAD
Suite, Apt. #, etc.

4. Date Incorporated or Qualified To Do Business in Florida
12/11/1995

City & State
Mims, FLORIDA
Zip
32754
Country
USA

City & State
Mims, FLORIDA
Zip
32754
Country
USA

5. FEI Number
593315992
Applied For
Not Applicable

6. CERTIFICATE OF STATUS DESIRED

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1	2	3	4
Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
D	GOVEIA, RICHARD PAUL	600 SOUTH HOPKINS AVE	TITUSVILLE FL 32780
P	GOVEIA, RICHARD PAUL	3985 RICHY ROAD	Mims, FLA 32754
W/S	SHAW, NANCY CHRISTINE	3985 RICHY ROAD	Mims, FLA 32754

REINSTATEMENT 1996

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

~~SHAW, NANCY C
600 SOUTH HOPKINS AVE
TITUSVILLE FL 32780~~

Name
SHAW, NANCY C
Street Address (P.O. Box Number is Not Acceptable)
3985 RICHY RD
Suite, Apt. #, Etc.
City
Mims
State
FL
Zip Code
32754

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: **Nancy C Shaw** REGISTERED AGENT MUST SIGN
Date: **10/26/96**

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. 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: **NANCY C SHAW** REGISTERED AGENT MUST SIGN
Date: **10/26/96** Daytime Phone #: **407-268-0769**