

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

10P2

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

DIVISION OF CORPORATIONS



REINSTATEMENT

DOCUMENT # P96000006581

1. Corporation Name

PUTNAM CONSTRUCTION INC.

Principal Place of Business

Mailing Address

405 NORMANDY DRIVE
INDIALANTIC FL 32903

405 NORMANDY DRIVE
INDIALANTIC FL 32903

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

01/22/1996

5. FEI Number

59-3354092

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
P	PUTMAN, PAUL D JR.	405 NORMANDY DRIVE	INDIALANTIC FL 32903

100002694631--8
-11/23/98--01146--020
****150.00 ****150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

PUTNAM, PAUL D JR
405 NORMANDY DRIVE
INDIALANTIC FL 32903

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date

11-16-98

11. This corporation owes or has paid 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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

11-16-98

407-722-4448

CR2E040 (9/98)

2012

Putnam Construction Inc.

"working with you"



405 NORMANDY DRIVE ♦ INDIALANTIC, FLORIDA 32903
Phone 407-722-4448 ♦ Fax 407-722-3210

November 17, 1998

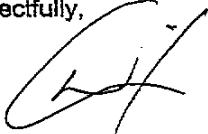
To whom it may concern:

I, P. David Putnam of Putnam Construction Inc., was given the following instructions by Tyrone of the Division of Corporation (850-487-6059) after learning that my corporation had been devolved.

I was told to notify the division in writing of the following:

I sent my corporate renewal form off in the mail earlier this year, however, I have now received a notice stating that my corporation has been devolved. Please waive the late fee and accept my payment at this time. If you have any questions, please contact me at 407-722-4448.

Respectfully,



P. David Putnam