

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 996 000014328

1. Corporation Name

Mc Coy's Concrete Company

2. Principal Office Address

2663 Eddie Road

3. Mailing Office Address

3669 Uncle Glover

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Tallahassee FLA.

City & State

Tallahassee FLA.

Zip

32308

Country

LEON

Zip

32312

Country

LEON

4. Date Incorporated or Qualified To Do Business in Florida

9/1987

5. FEI Number

593368828

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

Homar McCoy

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

3669 Uncle Glover R.D.

Suite, Apt. #, Etc.

City

Tallahassee

State

FL

Zip Code

32312

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

Homar McCoy

Date 1/17/03

REGISTERED AGENT MUST SIGN

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
President/owner	Homar McCoy	3669 Uncle Glover R.D.	Tallahassee, FLA. 32312
Office Manager	Princess McCoy	3669 Uncle Glover R.D.	Tallahassee, FLA. 32312
Project Supervisor	Calvin Ford	3844 Windmere R.D.	Tallahassee, FLA. 32311

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:

H. McCoy

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/17/03

Date

(850) 545-7266

Daytime Phone #

CR2E081 (10/02)

95 1/21

1/17/2003

TO:

Division of Corporations
P.O. Box 6327
TALLAHASSEE, FLA. 32314

FROM:

McCoy's Concrete Company
3669 Uncle Glover Road
TALLAHASSEE, FLA. 32312

REF: Reinstatement

Our Company moved 2 years ago. We never
received the uniform letter for 206. FIC NAME
203. Reinstatement (corp)

Packet for the years of 2000, 2001, or 2002.

The old address was: 2702 Powermill Court TALL, FLA.

If possible please waive these past fees,

because of the address change. I've enclosed

a check for \$600.⁰⁰ for Reinstatement fee.

THANKS!

McCoy's Concrete Comp.