

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

00 MAR 20 PM 3:56

DOCUMENT # P96000026823

1. Corporation Name

Tunnel Bat, Inc.

Principal Place of Business

48 Valencia Drive  
Dunedin, FL 34698

Mailing Address

48 Valencia Drive  
Dunedin, FL 34698

REINSTATEMENT 99-00

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

2. New Principal Office Address, If Applicable  
48 Valencia Drive

Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable  
48 Valencia Drive

Suite, Apt. #, etc.

4. Date Incorporated or Qualified  
To Do Business in Florida

3/27/96

5. FEI Number

59-3368840

Applied For

Not Applicable

City & State

Dunedin, FL

City & State

Dunedin, FL

Zip  
34698

Country  
USA

Zip  
34698

Country  
USA

CERTIFICATE OF STATUS DESIRED ☐

\$875: 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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
TSPD	Dave Richardson	48 Valencia Drive	Dunedin, FL 34698 600003187726--3 -03/29/00--01006--007 ****900.00 ****900.00

3/21

8. Name and Address of Current Registered Agent

James B. Azzarelli  
15906 Trevoise Lane  
Odessa, FL 33556

9. Name and Address of New Registered Agent

Name  
Todd Berger, Esq., Mouser & Wells, P.A.

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

810 63rd Avenue North

Suite, Apt. #, Etc.

City

St. Petersburg

State

FL

Zip Code

33702

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

REGISTERED AGENT MUST SIGN

Date 3/13/00

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/13/00

Date

Daytime Phone #