

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**APPLICATION
FOR 97-98
REINSTATEMENT**



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

APPROVED
AND
FILED

98 MAR -2 PM 3:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000078526

1. Corporation Name

STRATEGIES 3, INC.

Principal Place of Business

8700 KOGER BLVD.
SUITE 107
ST. PETERSBURG FL 33702

Mailing Address

8700 KOGER BLVD.
SUITE 107
ST. PETERSBURG FL 33702

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

2. New Principal Office Address, If Applicable

12601 AUTOMOBILE BLVD.

Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

CLEARWATER, FL

City & State

Zip

33762

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

09/19/1996

5. FEI Number

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)

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	ANDREWS, WILLIAM F JR.	140 9TH AVE NORTH	ST. PETERSBURG FL 33701
D	POSTLETHWAITE, MICHAEL R	5705 IMPERIAL KEY 1136 3RD AVE S.	TAMPA FL 33615 TIERRA VERDE, FL 33715
D	REST, HERBERT F DR.	380 PINELLAS BAYWAY, J	TIERRA VERDE FL 33715
<div style="text-align: center;"> REINSTATEMENT 97-98 <i>G. Ryan</i> <i>3/2/98</i> </div>			

8. Name and Address of Current Registered Agent

ANDREWS, WILLIAM F JR.
9700 KOGER BLVD.
SUITE 107
ST. PETERSBURG FL 33702

9. Name and Address of New Registered Agent

Name

ANDREWS, WILLIAM F. JR

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

12601 AUTOMOBILE BLVD

Suite, Apt. #, Etc.

City

CLEARWATER

State

FL

Zip Code

33762

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

William F. Andrews

REGISTERED AGENT MUST SIGN

Date

2/1/98

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)(l), 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:

William F. Andrews

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

2/1/98

Daytime Phone #

573-875264

CR20040 (8/97)