

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

00 SEP 12 PM 3:47

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # P96000100952

1. Corporation Name

Braswell Electric, Inc.

2. Principal Office Address

416 Commerce Way

Suite, Apt. #, etc.

110

City & State

Longwood, FL

Zip

32750

Country

USA

3. Mailing Office Address

P.O. Box 97

Suite, Apt. #, etc.

City & State

Duluth, GA

Zip

30096

Country

USA

**4. Date Incorporated or Qualified
To Do Business in Florida**

12/13/1996

5. FEI Number

65-0713358

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

C T CORPORATION SYSTEM

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

1200 South Pine Island Road

Suite, Apt. #, Etc.

City

Plantation

State

FL

Zip Code

33324

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

Dale W. Morris

DALE W. MORRIS
ASSISTANT-VICE-PRESIDENT

Date **09/08/2000**

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
P	Wilson Braswell	3989 Treemont Lane	Suwanee, GA 30024
V	Robert S. Coe	839 Tomlinson Terrace	Lake Mary, FL 32746
S/T	Susie Braswell	3989 Treemont Lane	Suwanee, GA 30024

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:

WILSON BRASWELL, President

9/11/2000 (770)476-4106

Date

Daytime Phone #

KE

CRZE081 (9/99)