

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

2011 DEC 28 AM 10:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000055062

1. Corporation Name

Pitts Construction Services, Inc

2. Principal Office Address - No P.O. Box #

9650 Beulah Road

Suite, Apt. #, etc.

3. Mailing Office Address

9650 Beulah Road

Suite, Apt. #, etc.

City & State

Pensacola Florida

City & State

Pensacola Florida

Zip

32526

Country

Escambia

Zip

32526

Country

Escambia

REINSTATEMENT 09-11

CR2B081 (11/10)

4. Date Incorporated or Qualified
To Do Business in Florida

06-20-1997

5. FEI Number

593496984

☐ 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

Myron Pitts

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

9650 Beulah Road

Suite, Apt. #, Etc.

City

Pensacola

State

FL

Zip Code

32526

800215579808

12/28/11--01023--004 **1050.00

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

Myron A. Pitts

REGISTERED AGENT MUST SIGN

Date

12-27-2011

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
PRES.	Myron Pitts	9650 Beulah Road	Pensacola FL 32526
		12/28	

10. E-mail Address: Pittspossum@aol.com

(To be used for future annual report notification)

11. 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., and that all fees owed by the corporation have been paid. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

SIGNATURE:

Myron A. Pitts

SIGNATURE AND TYPES OF OFFICERS MUST BE SIGNING OFFICER OR DIRECTOR

Date

Division of Corporations