

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

99 JUN 22 AM 9:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000068116

1. Corporation Name

ETCO Sales, Inc.

Principal Place of Business

Mailing Address

2180 Sanlando Center
2180 SR 434, West, Suite 4159
Longwood, Florida 32779

2180 Sanlando Center
2180 SR 434 West Ste. 4159
Longwood, Florida 32779

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

2. New Principal Office Address, If Applicable

103 Highline Drive

Suite, Apt. #, etc.

3. New Mailing Address, If Applicable

Post Office Box 521215

Suite, Apt. #, etc.

REINSTATEMENT 98-99

DO NOT WRITE IN THIS SPACE

4. Date Incorporated or Qualified
To Do Business in Florida

August 6, 1997

5. FEI Number

59-3462882

Applied For

Not Applicable

City & State

Longwood, Florida 32750

City & State

Longwood, Florida

Zip
32750

Country

Zip

32752-1215

Country

U.S.

CERTIFICATE OF STATUS DESIRED ☐

\$5.75 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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
D	Sidney L. Vihlen, III	1173 Spring Centre S. Blvd. Suite C	Altamonte Springs, Florida 32714
D	Karla Baumann	1173 Spring Centre S. Blvd. Suite C	Altamonte Springs, Florida 32714
P	Todd Pemberton	103 Highline Drive	Longwood, Florida 32750
VP	Renato Rey	103 Highline Drive	Longwood, Florida 32750
T	Donna M. Darby	103 Highline Drive	Longwood, Florida 32750
S	Walter B. Pemberton	103 Highline Drive	Longwood, Florida 32750

8. Name and Address of Current Registered Agent

Sidney L. Vihlen, III
2180 SR 434, West, Suite 4159
Longwood, Florida 32779

9. Name and Address of New Registered Agent

Name

Vihlen & Sills, P.A.

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

1173 Spring Centre South Boulevard

Suite, Apt. #, Etc.

Suite C

City

Altamonte Springs

State

FL

Zip Code

32714

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

Vihlen & Sills, P.A.

By: [Signature]

REGISTERED AGENT MUST SIGN

Date June 21, 1999

700002415857

06/25/99-01003-005

****900.00 ****900.00

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒

(See other side for information
on intangible tax.)

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further 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 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. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Sidney L. Vihlen, III, Director

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

June 21, 1999

Date

(407) 786-2200

Daytime Phone #