

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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APPLICATION
FOR
~~REINSTATEMENT~~

FLORIDA DEPARTMENT OF STATE
Theophilus H. Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000068474

1. Corporation Name

ATLANTIC COAST DEVELOPMENT & CONSTRUCTION, INC.

Principal Place of Business

580 N WICKHAM RD
SUITE E
MELBOURNE FL 32935

Mailing Address

2351 W. EAU GALIE BOULEVARD
SUITE #6
MELBOURNE FL 32935

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

08/07/1997

Suite, Apt. #, etc.

580 N. WICKHAM RD. # E

Suite, Apt. #, etc.

580 N. WICKHAM RD. # E

City & State

MELBOURNE, FL

City & State

MELBOURNE, FL

Zip

32935

Country

USA

Zip

32935

Country

USA

5. FEI Number

59-3464103

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
D	DROOR, NOEL	2351 W. EAU GALIE BLVD., SUITE	MELBOURNE FL 32935
D	MOAYER, FRANK	2351 W. EAU GALIE BLVD., SUITE	MELBOURNE FL 32935

000003493420--8
-12/11/00--01041--010
*****150.00 *****150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

DROOR, NOEL
2351 W. EAU GALIE BOULEVARD
SUITE #6
MELBOURNE FL 32935

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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

SIGNATURE REQUIRED

Date 11/20/2000

REGISTERED AGENT MUST SIGN

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., 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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

11/20/2000

Daytime Phone #

KE

ATLANTIC COAST DEVELOPMENT & CONSTRUCTION, INC

580 N. Wickham Road, Suite E
Melbourne, FL 32935
(321) 253-8050
(321) 253-8232, Fax

20f2

PP7
68474

November 20, 2000

Florida Department of State
Katherine Harris
Secretary of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Atlantic Coast Development & Construction

To Whom It May Concern:

We have received a "Notice of Administrative Dissolution or Revocation" for the above referenced corporation on November 19, 2000. Per our telephone conversation with Mr. Tyrone, the address change was requested on our previous submittal, however, this was never done and we never received the renewal permit application until November 19, 2000.

Per our conversation, enclosed please find the completed application form along with the \$150.00 required fee for renewal and reinstatement of the corporation.

We hope the enclosed application will meet with your approval.

Very Truly Yours,



Frank Moayer
President

ACDS Dissolution