

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000069477

1. Corporation Name

FLIGHT CONTROL SERVICES, INCORPORATED

02 SEP 03 11:28

SECRET
TALLAHASSEE, FLORIDA

300007673653--4

09/12/02--01001--022

*****300.00 *****300.00

2. Principal Office Address 351 - 8th Ave. SE		3. Mailing Office Address 351 - 8th Ave. SE	
Suite, Apt. #, etc. Hangar 3		Suite, Apt. #, etc. Hangar 3	
City & State St. Petersburg FL		City & State St. Petersburg, FL	
Zip 33701	County Pinellas	Zip 33701	County Pinellas

4. Date Incorporated or Qualified To Do Business in Florida 8/11/97	
5. FSI Number 59-3460979	Applied For Not Applicable
6. CERTIFICATE OF STATUS DESIRED ☐ \$8.75 Additional Fee required for Certificate of Status	

7. Name and Address of Current Registered Agent

Name

D & B Corporate Services, Inc.

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

5999 Central Avenue, Suite 202

Suite, Apt. #, Etc.

Suite 202

City

St. Petersburg

State
FL

Zip Code
33770

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

REGISTERED AGENT MUST SIGN

Date **8/28/02**

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	Dan French	351 - 8th Avenue SE	St. Petersburg, FL 33701

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)(b), 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: Dan French, President *Dan French*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/28/02 (727) 822-4217

Date

Daytime Phone #

CR-208 (8/01)

9/3/02