

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

04 MAR 29 AM 8:00

DOCUMENT # P97000095564

1. Corporation Name

R.L. Davis & Associates Limited, Incorporated

600031350966
03/29/04--01084--003 **\$00.00

2. Principal Office Address

4319 YORKETOWNE Rd

Suite, Apt. #, etc.

City & State

ORLANDO, FL

Zip

32812

Country

USA

3. Mailing Office Address

4319 YORKETOWNE Rd

Suite, Apt. #, etc.

City & State

ORLANDO, FL

Zip

32812

Country

USA

REINSTATEMENT 01-04

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

11/06/97

5. FEI Number

59-3479180

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

RUSSELL L. DAVIS JR

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

4319 YORKETOWNE Rd

Suite, Apt. #, Etc.

City

ORLANDO

State

FL

Zip Code

32812

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

X

X

Date

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/O	RUSSELL L. DAVIS JR	4319 YORKETOWNE Rd	ORLANDO, FL 32812

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: *

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

* 7 March, 2004 * 407 353-5978

CR2E081 (10/02)

282

R. L. DAVIS & ASSOCIATES LIMITED, INC.

4319 YORKETOWNE ROAD
ORLANDO, FL 32812
(407) 808-7467

March 9, 2004

Florida Department of State
Division of Corporations
Annual Report/Reinstatement Section
P.O. Box 6327
Tallahassee, Florida 32314

RE: Application for Reinstatement
Document p97000095564
59-3479180

Gentlemen:

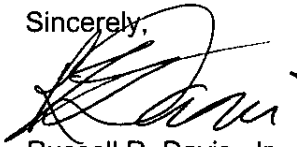
Enclosed please find our Application for Reinstatement along with our check for \$ 600.00 to cover our 2001, 2002, 2003, and 2004 Uniform Business Reports. I am an aviation inspector/evaluator, who writes maintenance manuals for large airline companies. While under these contracts, I spend most of my time overseas. I do not recall receiving these forms, and I was not aware of the need to file them annually.

As a courtesy to her clients, my accountant went on line to download the 2004 Annual Reports for her clients. She was concerned that many people would not understand the importance of filing this form if they did not actually receive one in the mail. During this process she discovered that I had been subject to administrative dissolution for not filing the annual reports.

This was an inadvertent oversight caused by my prolonged absences from the United States. I did not intentionally disregard your filing requirements. In light of these circumstances, I respectfully request that you waive any penalties associated with this matter.

Thank you for your attention to this matter.

Sincerely,



Russell R. Davis, Jr.
President

Enc.