

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

03 OCT 20 AM 8:56

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P98000000242

1. Corporation Name

ECHO EXPO, INC.

Principal Place of Business

726 CENTRAL FLORIDA PARKWAY  
#4  
ORLANDO FL 32824

Mailing Address

2316 NE MINNEHAHA  
VANCOUVER WA 98665  
US

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

01/02/1998

5. FEI Number

59-3486105

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status



REINSTATEMENT

03

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
PD	CANNARD, TINA A	2316 NE MINNEHAHA	VANCOUVER WA 98665
VD	CANNARD, CHRIS D	2316 NE MINNEHAHA	VANCOUVER WA 98665
S	HEALY, J. CHRIS	726 CENTRAL FLORIDA PARKWAY, STE	ORLANDO FL 32824
T	STURGIS, BRIAN K	726 CENTRAL FLORIDA PARKWAY, STE	ORLANDO FL 32824
700023955427 10/20/03--01050--007 **150.00			

8. Name and Address of Current Registered Agent

HEALY, CHRIS  
2975 N NARCOOSSEE RD  
SAINT CLOUD FL 34771

9. Name and Address of New Registered Agent

Name Chris Healy  
Street Address (P.O. Box Number is Not Acceptable)  
2975 N. NARCOOSSEE ROAD  
Suite, Apt. #, Etc. 5  
City Saint Cloud State FL Zip Code 34771

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. or 617.0505, F.S.

Signature of  
Registered Agent

*Chris Healy*  
REGISTERED AGENT MUST SIGN

Date

10/16/07

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:

*Chris Cannard*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10/13/2003 503-234-1552

Daytime Phone #

CR2E040 (7/03)



# Echo Expo

A Convention Decorating Company

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RE:Application for Reinstatement

Dear Sirs or Madams,

Please waive the reinstatement fee since the corporation did not receive the two-prior uniform business report notices.

I am enclosing the Application for Reinstatement and a check for a for-profit corporation of 150.00.

Thank you,

Chris Cannard  
Vice President  
Echo Expo, Inc.  
cannard@echoexpo.com  
800-422-0251 #3002