

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

03 FEB 21 AM 11:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

Florida Boat Surveying, Inc.

2. Principal Office Address

1306 Vermont Ave.

Suite, Apt. #, etc.

City & State

Tarpon Springs, FL

Zip

34689

Country

USA

3. Mailing Office Address

P.O. Box 3482

Suite, Apt. #, etc.

City & State

Holiday, FL

Zip

34690

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

02/24/1998

5. FEI Number

59-3496217

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

Theresa M. St. Martin

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

1306 Vermont Ave

Suite, Apt. #, Etc.

City

Tarpon Springs

State
FL

Zip Code
34689

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

Theresa M. St. Martin

REGISTERED AGENT MUST SIGN

Date

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
President	Theresa M. St. Martin	1306 Vermont Ave.	Tarpon Springs, FL 34689
V.P.	Mitchell E. St. Martin	1306 Vermont Ave.	Tarpon Springs, FL 34689

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:

Theresa M. St. Martin

Theresa M. St. Martin

02/05/2003 727-939-2733

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (10/02)

2/24

Florida Boat Surveying, Inc.

www.floridaboatsurveying.com

P. O. Box 3482

Holiday, FL 34690-0482

Phone: 1-727-939-2733

Fax: 1-727-939-0932

February 17, 2003

Department of State

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

**RE: Reinstatement of Corporation
Document #P98000017652**

To Whom It May Concern:

The purpose of this correspondence is to request reinstatement of the corporation, Florida Boat Surveying, Inc. We did not receive the Uniform Business Report for the year 2002 and 2003, as our mailing address changed. Our address is 1306 Vermont Avenue, Tarpon Springs, Florida, 34689.

Enclosed please find check number 03389 in the amount of \$300.00 for the years 2002 and 2003 along with the completed Corporation Reinstatement Form.

Thank you for your consideration.



Theresa St. Martin

President

Florida Boat Surveying, Inc.