

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

02 MAR 29 AM 11:51

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

UBR  
01-02

DOCUMENT # P98000022962

1. Corporation Name

YATES DEVELOPMENT, INC.

2. Principal Office Address

1406 BRISTOL PARK

Suite, Apt. #, etc.

City & State

HEATHROW, FL

Zip

32746

Country

3. Mailing Office Address

1406 BRISTOL PARK

Suite, Apt. #, etc.

City & State

HEATHROW, FL

Zip

32746

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

3/11/98

5. FE Number

65-0855242

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

CONRAD WAGNER

600005258956-5

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

1406 BRISTOL PARK PLACE

-04/12/02--01115--015 1

\*\*\*\*300.00 \*\*\*\*300.00

Suite, Apt. #, Etc.

City

HEATHROW

State  
FL

Zip Code

32746

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

*[Signature]*

REGISTERED AGENT MUST SIGN

Date 10/16/01

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	CONRAD WAGNER	1406 BRISTOL PARK	HEATHROW FL 32746
D	CHUCK WARREN	1 FL PARK DRIVE S	PALM COAST, FL 32137
			32137

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]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CONRAD WAGNER

Date

10/16/01

Daytime Phone #

407-804-0282

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February 22, 2002

To Whom It May Concern:

Enclosed please find a check in the amount of \$150.00 for corporation reinstatement. Unfortunately we have not received our original forms, perhaps due to a change of address. Due to the fact that we didn't receive the originals please reinstate Yates Development, Inc. and waive any fees that may have accrued.

Thank you for your time in this matter.

Cori Wagner  
Secretary  
Yates Development, Inc.

(407)804-0282