

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



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

FILED

00 JAN 18 AM 9:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # D980000027681

1. Corporation Name

RCR DEVELOPMENT COMPANY, Inc.

2. Principal Office Address

2560 RCA Blvd.

Suite, Apt. #, etc.

Suite 112

City & State

Palm Beach Gardens

Zip

33410-3337

Country

Palm Beach

3. Mailing Office Address

2560 RCA Blvd

Suite, Apt. #, etc.

Suite 112

City & State

Palm Beach Gardens

Zip

33410-3337

Country

Palm Beach

REINSTATEMENT 99-15

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

March 30, 1998

5. FEI Number

65-0826476

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

7. Name and Address of Current Registered Agent

Name

Harold G. Melville, Esq. Melville & Sowerby, PA

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

2940 South 25th Street

Suite, Apt. #, Etc.

City

Fort Pierce

State

FL

Zip Code

34981-5605

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

1/13/2000

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	Harold S. Reed	2560 RCA Blvd. Suite 112	Palm Beach Gardens, FL 334
v/s	Roy Chapin III	2560 RCA Blvd. Suite 112	Palm Beach Gardens, FL 3341
D	A. Lachlan Reed	114 Clarke Ave.	Palm Beach, FL 33480
D	James Rapp	5225 Counterplay Rd.	Palm Beach Gardens, FL 3341
D	John Rapp	5225 Counterplay Rd.	Palm Beach Gardens, FL 3341

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

Roy Chapin III V.P.

Date

1/11/00

Daytime Phone #

561-630-0701