

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 21 PM 3:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P98000033290

1. Corporation Name

SUCCESS SEMINARS, INC.

Principal Place of Business

Mailing Address

6822 22ND AVE N
434

ST. PETERSBURG FL 33710

6822 22ND AVE N
434

ST. PETERSBURG FL 33710

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

04/10/1998

5. FEI Number

59-3503797

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

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

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
D	DREW, DAVID C	6822 22 AVE N. STE 434	ST PETE FL 33710

980023358219

10/21/03--01012--001 **150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

DREW, DAVID C
6822 22 AVE N. 434
ST PETE FL 33710

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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

SIGNATURE REQUIRED

Date

REGISTERED AGENT MUST SIGN

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:

SIGNATURE REQUIRED
DAVID C DREW, PRESIDENT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10/16/03 727-525-0026

CR2E040 (7/03)

David C. Drew

6822 22nd Avenue N. #434 ~ St. Petersburg, Florida 33710
Phone 727-525-0026 ~ Fax 727-525-9318 ~ Email ddrew@tampabay.rr.com

October 16, 2003

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

RE: RENEWAL OF SUCCESS SEMINARS, INC. DOC. # P98000033290

As I did not receive any previous notice for renewal of this corporation, I am now enclosing application and check for it's renewal as instructed by your office.

Thank you for your prompt attention to this matter.



David C. Drew, President
SUCCESS SEMINARS, INC.