

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



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

DOCUMENT # **P98000038963**

1. Corporation Name

**FREEDOM GROUP-CALIFORNIA, INC.**

Principal Place of Business

1226 N. TAMiami TRAIL  
#100  
SARASOTA FL 34236

Mailing Address

~~783 S ORANGE AVE~~ 1126 N TAMiami  
STE 208 TRAIL  
SARASOTA FL 34236 STE 100

FILED  
03 OCT 27 AM 11:19

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



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

04/29/1998

5. FEI Number

65-0836514

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	ROSKAMP, ROBERT	1226 N. TAMiami TRAIL SUITE 100	SARASOTA FL 34236
VPD	CORBETT, JAMES P	1226 N. TAMiami TRAIL SUITE 100	SARASOTA FL 34236
STD	ROSKAMP, BRIAN R	1226 N. TAMiami TRAIL SUITE 100	SARASOTA FL 34236
			10/27/03--01004--001 **150.00
			300024099413 10/27/03--01004--001 **150.00

8. Name and Address of Current Registered Agent

PATTERSON, GREGORY  
1226 N TAMiami TRAIL  
#100  
SARASOTA FL 34236

9. Name and Address of New Registered Agent

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]*

REGISTERED AGENT MUST SIGN

Date 10/17/03

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]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/17/03

Date

(941) 954-  
1111 ext 304

Daytime Phone #

CR2E040 (7/03)

Freedom Group – California, Inc.

1126 N Tamiami Trail, Suite 100

Sarasota, FL 34236

Phone: (941) 954-1111

Fax: (941) 954-0909

October 17, 2003

Division of Corporations  
Annual Report/Reinstatement Section  
P.O. Box 6327  
Tallahassee, FL 32314-6327

Re: Doc Number: P98000038963  
Reinstatement Notice

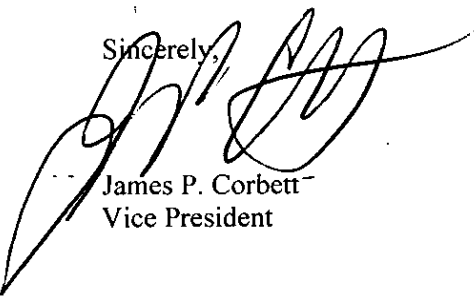
On October 16, 2003 the enclosed notice was forwarded by mail to us from a tenant at an old address. The form shows all addresses had been corrected to the new location except the mailing address. Therefore, since we had notified you, but your department did not update all address fields, please waive any penalty and reinstate the corporation.

We have enclosed the annual filing fee of \$150.00 with the completed form.

If you have any questions, feel to contact me (941-954-1111 ext 304) or Bill Lewis (941-954-1111 ext 306).

Thank you for your time and assistance.

Sincerely,



James P. Corbett  
Vice President