

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 AM 10:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P98000044148**

1. Corporation Name

DOUG HARMON CONSTRUCTION, INC.

Principal Place of Business

216 SANDPIPER DRIVE
CASSELBERRY FL 32707

Mailing Address

216 SANDPIPER DRIVE
CASSELBERRY FL 32707

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



REINSTATEMENT

03

4. Date Incorporated or Qualified
To Do Business in Florida

05/15/1998

5. FEI Number

59-3511509

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
D	HARMON, DOUGLAS D	216 SANDPIPER DRIVE	CASSELBERRY FL 32707
VP	CLOWES, PAT	217 Sandpiper Dr	CasSELberry FL 32707

800023969528
10/21/03--01060--014 **150.00

8. Name and Address of Current Registered Agent

HARMON, TINA
2300 SUN BANK CENTER
ORLANDO FL

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]
SIGNATURE REQUIRED
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 REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

407-695-8596
10/17/03
Daytime Phone #

CR2E040 (7/03)

Doug Harmon construction Inc

216 sandpiper drive
Casselberry Florida
32707

321-303-9220 cell/ voice mail
407-895-8596 home office fax
dougharmon@cfl.rr.com

Doug harmon construction inc, did not receive notification
of the anual corperate report

Thank you very much

Doug harmon
President



Company Name