

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

03 SEP 25 AM 11:53

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT #

898000069068

1. Corporation Name

Maxell Inc

2. Principal Office Address

110 Eglin Pkwy SE  
Suite, Apt. #, etc.

3. Mailing Office Address

110 Eglin Pkwy SE  
Suite, Apt. #, etc.

City & State

Fort Walton Beach FL

Zip 32548 Country USA

City & State

Ft. Walton Beach FL

Zip 32548 Country USA

REINSTATEMENT

W-03

4. Date Incorporated or Qualified  
To Do Business in Florida

8/4/98

5. FEI Number

593526729

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

Vincent M. Bruner

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

110 Eglin Pkwy SE

Suite, Apt. #, Etc.

City

Fort Walton Beach

State

FL

Zip Code

32548

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

*Vincent M. Bruner*

REGISTERED AGENT MUST SIGN

Date 9/21/03

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
PD	Vincent M Bruner	110 Eglin Pkwy SE (PD)	Ft Walton Beach, FL 32548
VD	Max Bruner Jr	110 Eglin Pkwy SE	Ft Walton Beach, FL 32548
TD	Tommy Henry	110 Eglin Pkwy SE	Ft Walton Beach, FL 32548
SD	Vic Deal	110 Eglin Pkwy SE	Ft. Walton Beach FL 32548

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:

*Vincent M. Bruner*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/21/03

Date

850-243-4227

Daytime Phone #

CR25081 (10/02)

7/9/25