

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**

FLORIDA DEPARTMENT OF STATE

**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

01 DEC 17 PM 1:38

DOCUMENT # P98000088136

1. Corporation Name

SANDRA STINCHFIELD, PA

2. Principal Office Address

12501 ULMERTON ROAD

Suite, Apt. #, etc.

LOT #8

City & State

LARGO, FL

Zip

33774

Country

USA

3. Mailing Office Address

12501 ULMERTON ROAD

Suite, Apt. #, etc.

LOT #8

City & State

LARGO, FL

Zip

33774

Country

USA

4. Date Incorporated or Qualified  
To Do Business in Florida

10/15/1998

5. FEI Number

59-3537133

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

SANDRA STINCHFIELD

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

12501 ULMERTON ROAD

Suite, Apt. #, Etc.

LOT #8

City

LARGO

State

FL

Zip Code

33774

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

*Sandra Stinchfield PA*

REGISTERED AGENT MUST SIGN

Date

11-23-01

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
D	SANDRA STINCHFIELD	12501 ULMERTON RD #8	LARGO, FL 33774

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

*Sandra Stinchfield*  
SANDRA STINCHFIELD

Date

11-23-01

Daytime Phone #

(727) 595-1604