

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 # P98000103824

1. Corporation Name

INDIAN RIVER CONNECTIONS, INC.

Principal Place of Business

240 N BABCOCK ST
SUITE 2B
MELBOURNE FL 32935

Mailing Address

PO BOX 410940
MELBOURNE FL 32941

REINSTATEMENT

FILED

03 NOV 17 AM 10:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



700024743707
11/17/03--01018--015 **158.75

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

2. New Principal Office Address, If Applicable

3540 Chancellorsville Av.

Suite, Apt. #, etc.

Melbourne, FL

City & State

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

4. Date Incorporated or Qualified
To Do Business in Florida

12/11/1998

5. FEI Number

59-3548684

Applied For

Not Applicable

Zip Country Zip Country

32934

USA

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	NELSON, ZACHARY L	3540 CHANCELLORSVILLE AVE	MELBOURNE FL 32934

8. Name and Address of Current Registered Agent

NELSON, ZACHARY L
3540 CHANCELLORSVILLE AVE
MELBOURNE FL 32934

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

Zachary L Nelson

REGISTERED AGENT MUST SIGN

Date 11-5-03

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:

Zachary L Nelson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

11-5-03 (321) 242-7747

Daytime Phone #

CR2040 (7/03)

Indian
River
Connections
"Get Hooked Up"

Voice, Data, Video, Fiber
and Structured Cabling

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


To Whom It May Concearn,
Please accept my application to reinstate Indian
River Connections, Inc as a corporation to do
business in Florida.

In addition, please accept the original renewal fee
of \$150.00. I realize this is an annual occurrence.
However, this disolution is the first request I
personally have seen for the calendar year of 2003.

I have had this problem at least one other time in
the past four years. From this point on, I will mark
down the dates in which future reports are due on
my office calendars in order to remind myself to
file this report on a much more timely basis.

I would greatly appreciate your consideration in
this matter.

Sincerely,



Zachary L. Nelson
CEO/Registered Agent
Indian River Connections, Inc.