## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

## APPLICATION FOR REINSTATEMENT



## FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State.

DIVISION OF CORPORATIONS

DOCUMENT# P

P98000108372

1. Corporation Name

F/V C STAR IV, INC.

Principal Place of Business

Mailing Address

10429 GEORGE SMITH ROAD LITHIA FL 33547 10429 GEORGE SMITH ROAD

LITHIA FL 33547

on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

FILED

01 JUN 25 AN II: 06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



If above addresses are incorrect in any way, line through incorrect information and enter correction below.										
New Principal Office Address, If Applicable     3. Ne			3. New Maili	ing Office Ad	ldress, If Applicable	Date Incorporated or Qualified     To Do Business in Florida     01/01/1999				
Suite, Apt. #, etc. Suite			Suite, Apt. #,	suite, Apt. #, etc.			5. FEI Number Applied For			
City & State			City & State			59 - 358 6395 Not Applicable				<del>  ''                                  </del>
Zìp	Zip Country		Zip		Country	6.			onal Fee required	
7. Names a	and Street Ad	dresses of Each Officer an	d/or Director (Flo	rida nonprof	it corporations must list at le	east 3 directors)				
Title(s)	Name of Officers and/or Directors			3	Street Address of Eac Officer and/or Directo					
VPSD	CLAYTON, KATHI L			10429 GEORGE SMITH ROAD			LITHIA FL 33547			
PD .	CLAYTON, MICHAEL A			10429 GEORGE SMITH ROAD			LITHIA FL 33547			
2	5000044620057 -07/06/0101035031 ****908.75 ****908.75									
8. Name and Address of Current Registered Agent						Name and Address of New Registered Agent				
CLAYTON, KATHI L 10429 GEORGE SMITH ROAD LITHIA FL 33547					Name  Street Address (P.O. Box Number is Not Acceptable)  Suite, Apt. #, Etc.					
10. I, being Signature of Registered A	$_{f}$ $$	athet C	last	ration, am fa	City amiliar with and accept the cooperation of the	obligations of Sect		State FL	Zip Cod	Je .
this reins	statement app	dication, the reason for disc	solution has been	eliminated, t	execute this application as the corporate name satisfies In this form do not qualify for	s the requirements	of section 607.0401	or 617.04	01 F.S.	that all fees