

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P99000045164

1. Corporation Name

CENTURY THREE CAPITAL CORPORATION

Principal Place of Business

Mailing Address

12500 BUTLER BAY CT
WINDERMERE FL 34786

12500 BUTLER BAY CT
WINDERMERE FL 34786

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc. Suite 200

Suite, Apt. #, etc. 7380 SAND LAKE ROAD

7380 SAND LAKE ROAD

Suite 200

City & State ORLANDO, FLORIDA

City & State ORLANDO, FLORIDA

Zip 32819

Zip 32819

Country ORANGE

Country ORANGE

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
CEO	DAVID H. EVANS	12500 BUTLER BAY CT	WINDERMERE, FL 34786
VP	TOM ITTNER	12500 BUTLER BAY CT	WINDERMERE FL 34786
		12500 BUTLER BAY CT	WINDERMERE FL 34786

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-12/27/00--01064--025
****750.00 ****750.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

12500 BUTLER BAY CT
WINDERMERE FL 34786

Name DAVID H. EVANS
Street Address (P.O. Box Number is Not Acceptable) 12500 BUTLER BAY CT
Suite, Apt. #, Etc.
City WINDERMERE State FL Zip Code 34786

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.

Signature of Registered Agent David H. Evans
REGISTERED AGENT MUST SIGN

Date 24/Oct/2000

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: David H. Evans / DAVID H. EVANS
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date 24/10/00
Daytime Phone #

FILED
00 DEC 15 PM 2:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



REINSTATEMENT

4. Date Incorporated or Qualified To Do Business in Florida 05/18/1999 SP
5. FEI Number 59-3577379 Applied For Not Applicable
6. CERTIFICATE OF STATUS DESIRED ☒ \$8.75 Additional Fee required for a Certificate of Status

CR2E040 (8/00)