

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

10/22

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Jim Smith
Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P99000069126

1. Corporation Name

NATIONAL CONTRACTING SERVICES, INC.

FILED

02 OCT 25 PM 4:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

8105 PLANTATION DRIVE
ORLANDO FL 32810

Mailing Address

8105 PLANTATION DRIVE
ORLANDO FL 32810

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

2. New Principal Office Address, If Applicable

875 Absher Lane

3. New Mailing Office Address, If Applicable

875 Absher Lane

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

St. Cloud, Florida

City & State

St. Cloud, Florida

Zip

34771

Country

USA

Zip

34771

Country

USA

2002 UBH



4. Date Incorporated or Qualified To Do Business in Florida	07/29/1999
5. FEI Number	59-3591205
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>	\$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)

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
1	2	3	4
PSD	RINEHART, JEFFREY D	375 ABSHER LANE	SAINT CLOUD FL 34
VTD	STRAND, NIEL J	8850 HONEYSUCKLE DRIVE	SEBASTIAN FL 32976
PSD	Rinehart, Jeffrey D	875 Absher Lane	St. Cloud, FL 34771
VTD	Strnad, Niel J	4040 Pepper Tree St.	Grant, FL 32949

8. Name and Address of Current Registered Agent

RINEHART, JEFFREY D
8105 PLANTATION DRIVE
ORLANDO FL 32810

875 Absher Lane
St. Cloud, FL 34771

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

10/25/02-01058-003 ***150.00

CR2E040 (8/02)

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

SIGNATURE REQUIRED
REGISTERED AGENT MUST SIGN

Date 10-23-02

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RINEHART 10-23-02

800-822-4133

Date

Daytime Phone #

20f2



NATIONAL CONTRACTING SERVICES, INC.
875 Absher Lane ~ Saint Cloud, FL 34771
Phone 800-822-4133 ~ Fax 407-957-7763

October 23, 2002

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314
850-245-6096

National Contracting Services, Inc. did not receive the two prior notices to file the UBR report. We are asking that we be reinstated due to circumstances beyond our control. Attached you will find our correct information for our Principle Office address, Mailing address and corrections for addresses on Officers / Directors of National Contracting Services, Inc. Enclosed check for \$150.00 is the fee to file report without penalty. If you have any questions, feel free to contact my office.

Sincerely,

Jeffrey D. Rinehart
President