

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

AND
FILED

00 OCT 23 PM 1:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P99000081985

1. Corporation Name

SLS CONSTRUCTION, INC.

Principal Place of Business

3892 PROSPECT AVENUE
NAPLES FL 34104

Mailing Address

3892 PROSPECT AVENUE
NAPLES FL 34104



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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

09/16/1999

5. FEI Number

65-0950209

Applied For

Not Applicable

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	W. BRYAN SEWARD	3892 PROSPECT AVENUE	NAPLES FL 34104
D	SEWARD, WILEY B	3892 PROSPECT AVENUE	NAPLES FL 34104
D	LESTER, BRYAN P	3892 PROSPECT AVENUE	NAPLES FL 34104

8. Name and Address of Current Registered Agent

W. BRYAN SEWARD
3892 PROSPECT AVENUE
NAPLES FL 34104

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.

Signature of
Registered Agent

Date 10-17-00

REGISTERED AGENT MUST SIGN

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

Date

Daytime Phone #

10-17-00 248-374-2122

CR2E040 (8/00)

SLS Construction

3060 Prospect Ave.
Naples, FL 34104
Phone: (941) 6439-766

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October 17, 2000

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Dear Sir or Madam:

On April 14, 2000 SLS Construction, Inc. filed its annual report/uniform business report, in accordance with Florida Statutes. The Filing was rejected along with the filings for two of our other companies SRI, Inc. and SRI Marble & Granite, Inc. All filings were resubmitted with proper FEI numbers. SRI, Inc. and SRI Marble & Granite, Inc. were received and accepted. It seems that SLS Construction, Inc. was lost some where in route. I am requesting a one-time waiver of the reinstatement fee. In consideration of the fact that you received the filing and funds in May and the funds were accepted. Your assistance in this matter is appreciated.

Sincerely,



Charles Ickes
Operations Manager

Enc: (1)