

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT
FLORIDA DEPARTMENT OF STATE
Pandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S31572

1. Corporation Name

NORMAN DAVIS ENTERPRISES, INC.

Principal Place of Business

3040 GULF-TO
BAY, SUITE 204
CLEARWATER FL 34619
US

Mailing Address

3040 GULF-TO-BAY BLVD
SUITE 204
CLEARWATER FL 34619
US

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, Apt. #, etc.

City & State

City & State

Zip

33769

Country

Zip

33759

Country

4. Date Incorporated or Qualified
To Do Business in Florida

02/13/1991

5. FEI Number

59-3050353

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 (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
ST	DAVIS, GERALD E.	3040 GULF TO BAY BLVD., #204	CLEARWATER FL
DP	FERENZ, NORMAN J.	3040 GULF-TO-BAY, SUITE 204	CLEARWATER FL

000002331890--0
-10/28/97--01088--011
****165.00 ****165.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

DAVIS, GERALD E.
3040 GULF-TO-BAY BLVD., SUITE 204
CLEARWATER FL 34619

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

REGISTERED AGENT MUST SIGN

11. This corporation owes or has paid the current year
Intangible Personal Property tax due June 30.

Yes ☐ No ☐

(See other side for information
on Intangible tax.)

12. 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.

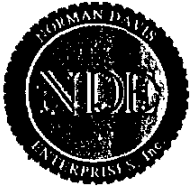
SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Gerald E. Davis
GERALD E. DAVIS
10-22-97 813 796 3338



3040 Gulf-to-Bay Boulevard
Suite 204
Clearwater, Florida 34619

(813) 796-3338
FAX (813) 724-9713

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Division of Corporations
409 East Gaines Street
Tallahassee, FL 32399

RE: FEI #59-3050353 - Corporation Application

To Whom it May Concern:

Please be advised that our office never received our first annual report for 1997 nor did we receive any type of notice that the report was due or past due. We therefore are remitting the fees due for the year now along with the report but we feel we should not have to pay the reinstatement fees as we had no prior notice of this report being due.

Please contact our office with any questions at (813)796-3338.

Thank You,

Norman Davis Enterprises, Inc.