

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**APPLICATION
FOR
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **S32355**

1. Corporation Name

MURDOCK DEVELOPERS, INC.

Principal Place of Business

Mailing Address

1861 PLACIDA ROAD
SUITE 204
ENGLEWOOD FL 34223
US

1861 PLACIDA ROAD
SUITE 204
ENGLEWOOD FL 34223
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

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business In Florida

02/18/1991

5. F.E.I. Number

65-0258481

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
D	MCKINLEY, MICHAEL R.	1861 PLACIDA RD #204	ENGLEWOOD FL
D	BATSEL, C GUY	1861 PLACIDA RD #204	ENGLEWOOD FL
D	SEITZ, WILLIAM T.	1861 PLACIDA RD #204	ENGLEWOOD FL

REINSTATEMENT

97
12/19/97

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

MCKINLEY, MICHAEL R
1861 PLACIDA ROAD
SUITE 204
ENGLEWOOD FL 34223

Name
C. Guy Batzel
Street Address (P.O. Box Number is Not Acceptable)
1861 Placida Road
Suite, Apt. #, Etc.
Suite 204
City
Englewood
State
FL
Zip Code
34223

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

[Signature of Michael R. McKinley]

REGISTERED AGENT MUST SIGN

Date

12/15/97

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 of C. Guy Batzel]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12/15/97 944 4947713

Date

Daytime Phone #

CP25040 (8/97)