

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

**APPLICATION  
FOR  
REINSTATEMENT**



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

**AND  
FILED**

97 OCT 30 AM 9:06

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # S77215**

1. Corporation Name

**CONTROL DESIGN ENGINEERING, INC.**

Principal Place of Business

7820 PROFESSIONAL PLACE  
SUITE 2  
TAMPA FL 33637  
US

Mailing Address

~~PO BOX 271700~~  
~~TAMPA FL 33637~~  
~~US~~

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

**7820 PROFESSIONAL PLACE**

Suite, Apt. #, etc.

**SUITE 2**

City & State

**TAMPA, FLORIDA**

Zip

**33637**

Country

**US**

4. Date Incorporated or Qualified  
To Do Business in Florida

09/03/1991

5. FEI Number

59-3089046

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
P, D	FERGUSON, MICHAEL E.	910 RIVER RAPIDS AVE.	BRANDON FL 33637
<del>V</del>	<del>RIVERA, GINGER</del>	<del>3100 SANTE WAY</del>	<del>VALRICO FL</del>
<del>V.S.D</del>	<del>MARTIN</del>		<del>700002337767-7</del> <del>-11/04/97--01064--014</del> <del>****758.75 ****758.75</del>
V, S.D	COLLINS, MARTIN	11109 INDIAN OAKS DR.	TAMPA, FL 33625

8. Name and Address of Current Registered Agent

FERGUSON, MICHAEL E.

~~6101 JET PORT INDUSTRIAL BLVD~~  
~~TAMPA FL 33634~~

9. Name and Address of New Registered Agent

Name

**FERGUSON, MICHAEL E.**

Street Address (P.O. Box Number is Not Acceptable)

**910 RIVER RAPIDS AVE**

Suite, Apt. #, Etc.

City

**BRANDON**

State

**FL**

Zip Code

**33511**

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

*Michael E. Ferguson*

REGISTERED AGENT MUST SIGN

Date **10/28/97**

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.

813-899-9240

SIGNATURE *Michael E. Ferguson*, MICHAEL E. FERGUSON, PRESIDENT, 10/28/97

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E040 (8/97)