

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



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

APPROVED
AND
FILED

01 JUN -5 AM 11:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

V 53135

1. Corporation Name

FCC DEVELOPMENT CORPORATION

700004416907--9
-06/13/01--01009--019
***3176.25 ***1058.75

2. Principal Office Address

8375 Dix Ellis Tr.

3. Mailing Office Address

- Same -

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 203

City & State

City & State

Jacksonville, FL

Zip

Country

Zip

Country

32256

USA

4. Date Incorporated or Qualified
To Do Business in Florida

7/24/92

5. FEI Number

59-3156261

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

John E. Cook

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

8375 Dix Ellis Trail

Suite, Apt. #, Etc.

Suite 203

City

Jacksonville

State

FL

Zip Code

32256

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent JOHN E. COOK

REGISTERED AGENT MUST SIGN

Date 5/24/01

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
D/P	Park L. Beeler	8375 Dix Ellis Tr, St. 203	Jacksonville, FL 32256

REINSTATEMENT 99-01

10. 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.

PARK L. BEELER

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/24/01 (904) 363-1384

Date

Daytime Phone #

CR2061 (9/00)



UCC FILING & SEARCH SERVICES, INC.
526 East Park Avenue
Tallahassee, Florida 32301
(850) 681-6528

HOLD
FOR PICKUP BY
UCC SERVICES
OFFICE USE ONLY

June 5, 2001

CORPORATION NAME (S) AND DOCUMENT NUMBER (S):

FCC Development Corporation

Filing Evidence

☒ Plain/Confirmation Copy

☐ Certified Copy

Retrieval Request

☐ Photocopy

☐ Certified Copy

Type of Document

☐ Certificate of Status

☒ Certificate of Good Standing

☐ Articles Only

☐ All Charter Documents to Include
Articles & Amendments

☐ Fictitious Name Certificate

☐ Other

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2001 JUN -5 AM 10:06
TO ACKNOWLEDGE
EFFICIENCY OF FILING

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	Non Profit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of RA Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Reports
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation
<input checked="" type="checkbox"/>	Reinstatement

REGISTRATION/QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other