

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
00 OCT 19 AM 9:37

DOCUMENT # **V69054**

1. Corporation Name

**PARKER'S CUSTOM SHEET METAL, INC.**

Principal Place of Business

316 N.E. 3RD STREET  
DELRAY BEACH FL 33444  
US

Mailing Address

316 N.E. 3RD STREET  
DELRAY BEACH FL 33444  
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

09/30/1992

5. FEI Number

65-0372363

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	KNUTH, BRADLEY CHARLES	316 N.E. 3RD ST.	DELRAY BEACH FL
D	SPICHTY, MARK	316 N.E. 3RD ST.	DELRAY BEACH FL
S	BRIDGES, BILL	316 NE 3RD ST	DELRAY BCH FL 33444
			800003447708-5 -11/01/00--01109--010 ****750.00 ****750.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

KNUTH, BRADLEY C  
316 N.E. 3RD ST  
DELRAY BEACH FL 33444

Name

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

Suite, Apt. #, Etc.

City

State

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

*Bradley C Knuth*  
**SIGNATURE REQUIRED**  
REGISTERED AGENT MUST SIGN

Date 10-16-2000

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:

*Bradley C Knuth*  
**SIGNATURE REQUIRED**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10-16-2000  
Date

Daytime Phone #

CR2E040 (8/00)